

March 2, 2016

Received  
3/7/16

Dr. Nicole Alexander-Scott  
RI Department of Health  
3 Capitol Hill  
Providence, RI 02908  
[Nicole.AlexanderScott@health.ri.gov](mailto:Nicole.AlexanderScott@health.ri.gov)  
By email/USPS

Dear Dr. Alexander-Scott,

I am writing to protest the imminent closure of the birthing center at Memorial Hospital of RI in Pawtucket, and specifically the timeline and manner in which it was announced. As I understand it, Care New England announced on Monday February 29 that they were closing the center, and we learned yesterday that the closure will be effective March 10. In addition to the lamentable loss of hospital services to the city of Pawtucket (of which I am a resident), my wife is due with our first baby on March 22, and we were planning on delivering at Memorial. With this news, we were informed that not only would we have to switch hospitals, but also find a new doctor to deliver the baby, because our current doctor is an attending at Memorial but does not yet have admitting privileges at Women & Infants, the only other hospital in the Providence area providing obstetric services. Apparently, she will be unable to get admitting privileges at W&I until the end of the month at the earliest. As you can imagine, this has turned into a very stressful situation having to find a new doctor and make alternate plans less than three weeks before the baby is due.

While I understand that financial considerations dictate that the birthing center at Memorial may eventually have to close, I simply cannot believe the audacity of Care New England in announcing the timeline of the closure with virtually no notice. To go from announcement to closure in less than two weeks is not appropriate, and I question whether it is even legal. I notice a reverse Certificate of Need has not been filed with the department, or if it has it is not posted on the DOH website. My wife is a regulatory health care attorney in Providence, and with her having done many of these CONs, I know the timelines for regulatory approval are usually much longer than this. I also know your office has the ability to require a public comment period. I urge you, on behalf of the doctors, employees, patients, and expectant mothers, to do everything in your power to at least delay the closure so it is not so immensely and immediately disruptive to so many lives in northern Rhode Island.

Sincerely,

Janet Wood





# State of Rhode Island and Providence Plantations

HOUSE OF REPRESENTATIVES

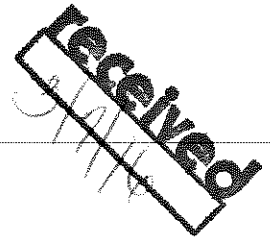
REPRESENTATIVE DAVID A. COUGHLIN, JR., *District 60*

*Committee on Judiciary*

*Committee on Municipal Government*

March 2, 2016

Dr. Nicole Alexander-Scott MD, MPH  
Director, RI Department of Health  
3 Capitol Hill-Suite 1  
Providence, RI 02908



Dear Director Scott,

I am writing to you out of my deep concern regarding the proposed plans announced by Care New England and Memorial Hospital to close some of their most necessary services to the citizens of Pawtucket, such as their maternity ward and intensive care unit.

I am especially outraged at the proposed closing of the birthing center, which is a clear threat to the health of Pawtucket's hard working families and mothers who have relied on Memorial Hospital for generations. More than 400 children were born at Memorial Hospital last year.

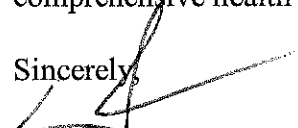

For over 100 years, Memorial Hospital has welcomed Pawtucket's newest residents into this world. To call this possible loss to the City of Pawtucket tragic is a gross understatement and I urge you to see through the financial coldness of this decision and consider the institutional and community value that the birthing center at Memorial Hospital represents to the city I am proud to represent at the State House.

Along with the loss of crucial health services to this community, the brutal layoffs threatening the loyal and dedicated employees of Memorial Hospital is equally unacceptable and troubling. Unfortunately in this day and age, health care has been reduced to a monetary bottom line, casting aside the needs of patients and the commitment and compassion of its employees and instead only focusing on dollar signs on spread sheets. This is a deeply disconcerting trend and I cannot stand idly by while such attacks to the public health of my community are threatened.

I call upon you and state regulators to review this proposal carefully, weighing all tangible and intangible factors before allowing this plan to go forward. Please keep in mind that your decision will not only affect bottom-line numbers in a company ledger, but more importantly, it will affect the very health of some and the livelihoods of others.

Memorial Hospital has long been part of the city's fabric and our people deserve the comprehensive health services that I urge you not to take away from them.

Sincerely,

  
Representative David A. Coughlin Jr.  




## Closure of Memorial Hospital Birthing Center

JW

To: AlexanderScott, Nicole (DOH); Cc: ☐ Dexter, Michael (DOH); ☐

Reply all |

Wed 3/2/2016 4:29 PM

Flag for follow up.

March 2, 2016

Dr. Nicole Alexander-Scott

RI Department of Health

3 Capitol HillProvidence, RI 02908Nicole.AlexanderScott@health.ri.gov

By email/USPS

Dear Dr. Alexander-Scott,

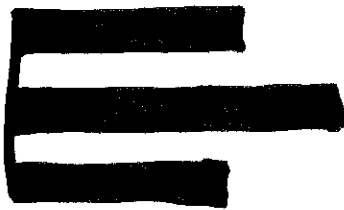
I am writing to protest the imminent closure of the birthing center at Memorial Hospital of RI in Pawtucket, and specifically the timeline and manner in which it was announced. As I understand it, Care New England announced on Monday February 29 that they were closing the center, and we learned yesterday that the closure will be effective March 10. In addition to the lamentable loss of hospital services to the city of Pawtucket (of which I am a resident), my wife is due with our first baby on March 22, and we were planning on delivering at Memorial. With this news, we were informed that not only would we have to switch hospitals, but also find a new doctor to deliver the baby, because our current doctor is an attending at Memorial but does not yet have admitting privileges at Women & Infants, the only other hospital in the Providence area providing obstetric services. Apparently, she will be unable to get admitting privileges at W&I until the end

of the month at the earliest. As you can imagine, this has turned into a very stressful situation having to find a new doctor and make alternate plans less than three weeks before the baby is due.

While I understand that financial considerations dictate that the birthing center at Memorial may eventually have to close, I simply cannot believe the audacity of Care New England in announcing the timeline of the closure with virtually no notice. To go from announcement to closure in less than two weeks is not appropriate, and I question whether it is even legal. I notice a reverse Certificate of Need has not been filed with the department, or if it has it is not posted on the DOH website. My wife is a regulatory health care attorney in Providence, and with her having done many of these CONs, I know the timelines for regulatory approval are usually much longer than this. I also know your office has the ability to require a public comment period. I urge you, on behalf of the doctors, employees, patients, and expectant mothers, to do everything in your power to at least delay the closure so it is not so immensely and immediately disruptive to so many lives in northern Rhode Island.

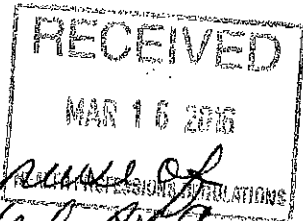
Sincerely,

Jason Wood, Ph.D.

A large, solid black rectangular redaction mark covering the signature area.

RI Dept of Health  
3 Capital Hill  
Providence, RI 02907

3/16/16

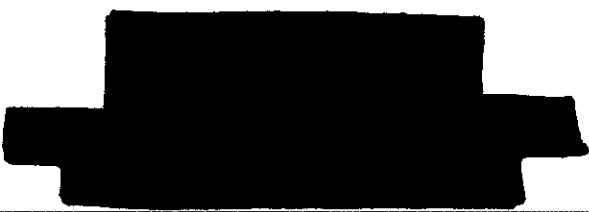


To Whom it may concern:

I am writing in my capacity as 2015 Nurse of the Year at Pawtucket Memorial Hospital. As a member of the intensive care nursing staff I feel that I can illustrate how many resources are supplied to the hospital patients.

In addition to our duties in the intensive care unit we provide other services to the med/surg and rehab patients. These duties include, but are not limited to, starting intravenous lines, drawing labs, assisting in blood transfusions and assisting in nursing evaluations of complex patients. When a patient does deteriorate on the med/surg or rehab floors we respond to "State Codes", "Code Blues" and "Rapid Response" codes. All of these are essential to the rapid response code's mission as an opportunity to prevent further deterioration of a patient's condition.

Please consider all that we do for our patients. The people of Pawtucket and Central Falls are some of the most need people in the State. Please don't limit their access to high quality acute and critical care. In closing, I can attest to the exceptional care at Pawtucket Memorial Hospital, as I was just a patient there myself. Thank You  
Jeanette Barre, RN, BSN, CCRN



March 2, 2016

Sandra Powell  
Rhode Island Department of Health  
3 Capitol Hill, Room 410  
Providence, RI 02903

Re: Memorial Hospital of Rhode Island Birthing Center

Dear Sandra,

I am writing to you regarding the movement of obstetric services provided at the Memorial Hospital of Rhode Island Birthing Center to other Care New England hospitals. As I'm sure you have seen in the local newspapers, Michael Dacey, president of Memorial, stated that there was no timetable set for the Birthing Center move. However, I have been informed by my doctor, Melissa Nothnagle, MD, that in reality Care New England is planning to cease deliveries at Memorial as of Thursday, March 10, 2016, just over a week from today. In addition to my concerns about this as an attorney and whether Care New England is following the appropriate regulatory processes, I also have a personal stake in this matter and am writing to you as an affected person.

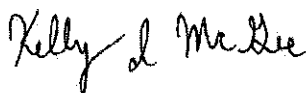
I am currently 37 weeks pregnant and have planned to deliver at the Memorial Hospital Birthing Center since finding out about my pregnancy. My due date is March 22, 2016. Dr. Nothnagle confirmed in a voicemail to me this morning that Memorial would cease deliveries as of March 10. In addition, Dr. Nothnagle and the other obstetric attending physicians at Memorial will not have privileges at Women & Infants Hospital until sometime after the Women & Infants Board meets on March 24. I now find myself less than three weeks away from my due date without a physician I know and trust who will be credentialed to deliver in the state of Rhode Island after March 10.

Dr. Nothnagle is doing her best to find someone who has privileges at Women & Infants who could take me on as a patient, but this would be someone who I have never met before and with whom I have no existing physician-patient relationship. At a time when I should feel secure in knowing where my baby will be born and who will deliver my baby, I am instead feeling a high level of stress as my doctor and I scramble to figure out what to do if my baby comes during the period when she has no obstetrics privileges anywhere.

Further, there is a specific reason I chose to deliver at Memorial and not Women & Infants, and that is because of the patient-centered care for which the Memorial Birthing Center is known. At the very least, I, and other patients in my situation, deserve more than a week's notice to completely rearrange our birth plans. The fact that my doctor cannot even attend my birth during a period of time that includes my anticipated due date just adds insult to injury.

I ask that the Department of Health look into this matter, and that the Department prevent Memorial Hospital, and its parent Care New England, from abruptly closing the Memorial Hospital Birthing Center without a reasonable period of notice and opportunity for contingency planning for its patients and staff.

Sincerely,

A handwritten signature in cursive script, reading "Kelly I. McGee".

Kelly I. McGee, Esq.

cc: Michael Dexter  
Stephen Morris, Esq.

March 3<sup>rd</sup>, 2016

Dr. Alexander-Scott  
Department of Health  
3 Capitol Hill  
Providence, RI 02908

Dear Dr. Alexander-Scott,

I write to you today to express my deep sadness at hearing the news about the closing of the birthing center at Memorial Hospital.

Though my son was born with the help of the amazing staff at Memorial, he experienced some unexpected complications that resulted in him being transferred the day after he was born to the NICU at Women and Infants. After many days of labor and with little time to recover (a hot mess, frankly!), I camped out for many days and nights on a couch in the NICU, attempting unsuccessfully to rest, learned to nurse a child who was constantly being poked, prodded and hooked up to beeping wires, and longed for nothing more than to be home with him, in my own bed. Eventually, after what seemed like years but was actually days, we were allowed to go home with our now healthy child.

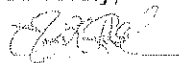
When I got pregnant with my daughter Elsa two years later, I planned a home birth—not because I am a “home birth person” (I used to think that was a thing, and that that thing didn’t include me)—but because I wanted to participate in the incredible level of prenatal care the homebirth midwives provided, as well as to minimize the time away from my son, who had just turned two—I was not too keen on spending too much time in the hospital again, if I could help it.

As we had prearranged, the moment there was even a question of safety during my labor at home with Elsa, we transferred to Memorial (I likely could have rode it out at home, but the midwives are not cowboys- they are birthing professionals). The transfer was, relatively speaking, in the context of birth, without issue. My daughter was born with the help of the wonderful staff at Memorial minutes after our arrival. Two hours later, under the care of the midwives, I was home, in my own bed, introducing my son to his new sister. No wires, no beeping, no couch not meant for sleeping- it was a revelation. I will be grateful to the staff at Memorial (and the midwives and our amazing doula) for the rest of my life for the beauty of this experience.

Friends in much bigger cities have been awed and inspired by our birthing community in Rhode Island. With the closing of Memorial, a key link in the system of integrated care for mothers here will be severed—we must replace this link, or we risk losing one of our greatest strengths. Let’s continue our tradition of being known for our superb care, innovation, and compassion for mothers—it would be truly heartbreaking to lose it.

Thank you for you time.

Sincerely,



Manya K. Rubinstein





## Shelov, Elizabeth (OHHS)

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**From:** Powell, Sandra (DOH)  
**Sent:** Sunday, March 06, 2016 11:23 PM  
**To:** Alston, Kenny (OHHS); Morris, Stephen (DCYF); Shelov, Elizabeth (OHHS)  
**Cc:** Dexter, Michael (DOH)  
**Subject:** Fw: MHRI, a vital medical facility to northern RI

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FYI  
Sandra

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**From:** AlexanderScott, Nicole (DOH)  
**Sent:** Sunday, March 6, 2016 7:35:52 PM  
**To:** Abdullah SHAHIN  
**Cc:** Dexter, Michael (DOH); Powell, Sandra (DOH)  
**Subject:** Re: MHRI, a vital medical facility to northern RI

Thank you, Dr. Chahin,  
I'm forwarding your comments to the certificate of need team at RIDOH to be included as input for the application.  
Regards,

Nicole E. Alexander-Scott, MD, MPH  
Director  
Rhode Island Department of Health  
Three Capitol Hill, Room 401  
Providence, RI 02908  
(401) 222-1018  
(401) 222-6548 - fax  
nicole.alexanderscott@health.ri.gov

Rita Menard  
Executive Assistant to the Director  
(401) 222-1018  
rita.menard@health.ri.gov

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**From:** Abdullah SHAHIN [REDACTED]  
**Sent:** Sunday, March 6, 2016 3:44 PM  
**To:** AlexanderScott, Nicole (DOH)  
**Subject:** MHRI, a vital medical facility to northern RI

Dear Dr. Alexander-Scott,

My name is Abdullah Chahin, and I am one of the providers at MHRI. I have witnessed the sad events unfolding at this facility that is very dear to my heart. I have trained as an internal resident at MHRI and I am currently attending on its infectious diseases service. I have witnessed the change of leadership over the last 3 years. This is a hospital that has been

dealing with financial problems for more than a decade. It's leadership problems is even older. Care New England and MHRI agreed on a merger in 2012. CNE subsequently took the leadership role in that hospital. Over those 3 years, many staff - including doctors, nurses, administrators, and other ancillary staff were let go and were never replaced. Entire medical services were lost and no real effort was done to replace them. Subsequently, the number of patients that the hospital could admit and take care of fell to an all time low. Instead of trying to recruit, CNE's approach was downsizing medical and ancillary staff to cut costs. The ED is frequently diverting or sending out ICU patients as the unit does not have enough nurses on service. The unit's capacity is 16 beds. The unit caps at 6 or 8 beds, and the rest would have to go out, simply because they chose not to pay for an additional nurse shift. This is not unique to the ICU but has been an issue for all services.

Pawtucket and central falls are two under-served communities that rely on the services on MHRI. Those communities will be devastated to lose the inpatient units and the maternity ward, and it won't be long until the outpatient services - which are currently very busy and doing well - will face the same fate of the inpatient units. No real effort was made by CNE to help rehabilitate the facility, the staff, or the services over the time they took over. No outreach programs, no real effort to fix the administrative problems that the hospital have been suffering for so long. The patients of Pawtucket and central falls are of low income and devastated communities. The close proximity of the facility is key to those individuals, as many of them do not have cars or means of transportation. Moving the inpatient services to Kent hospital would isolate patients from their families and friends, as there are no direct public transportation method that they can use. The training programs in MHRI has been a big asset to the hospital and the communities it serves. Losing those training spots would cause additional devastation. The maternity ward is the only one accessible one to these community. We have played a major key in early diagnosis and prevention in communicable disease. I personally diagnosed and help treat a family whom a member came from overseas carrying salmonella and 6 cases were addressed at that time. Just today, we diagnosed a case with Chagas disease and are working with CDC on it. This speaks of the vital role this small, yet very active, hospital in this town.

It is sad to see the fate of such great place determined - on CNE's side - by an administrator who attends a presentation for a couple of hours and then makes a decision that negatively impact the lives of thousands of patients, not to mention hundreds of employees who are also part of those communities. As a non-profit entity, and while serving an under-served community, the mission should precede the checkbook. I have no doubt that any caring administration will be able to turn this place around and make it, once again, a great community hospital and an excellent teaching facility. I really believe that closing (or downsizing it) is not the right move to take. I urge you and the officials at RI DOH to help us maintain this vital service to a community in dire need. Thank you for taking the time to read my letter.

Sincerely,  
Abdullah Chahin, MD

**Shelov, Elizabeth (OHHS)**

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**From:** Dexter, Michael (DOH)  
**Sent:** Wednesday, March 09, 2016 9:23 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** Fw: Memorial Hospital of Rhode Island

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**From:** AlexanderScott, Nicole (DOH)  
**Sent:** Tuesday, March 8, 2016 7:04:00 PM  
**To:** Elhamamsy, Salaheldin  
**Cc:** Dexter, Michael (DOH); Powell, Sandra (DOH)  
**Subject:** Re: Memorial Hospital of Rhode Island

Thank you, Dr. Elhamamsy.  
I'm forwarding your concerns to the Center for Health Systems Policy and Regulations that leads our certificate of need process, so that your input is included as part of the application.  
Regards,

Nicole E. Alexander-Scott, MD, MPH  
Director  
Rhode Island Department of Health  
Three Capitol Hill, Room 401  
Providence, RI 02908  
(401) 222-1018  
(401) 222-6548 - fax  
nicole.alexanderscott@health.ri.gov

Rita Menard  
Executive Assistant to the Director  
(401) 222-1018  
rita.menard@health.ri.gov

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**From:** Elhamamsy, Salaheldin [REDACTED]  
**Sent:** Tuesday, March 8, 2016 12:06 PM  
**To:** AlexanderScott, Nicole (DOH)  
**Subject:** Memorial Hospital of Rhode Island

Dear Dr Scott,

I am writing this email to voice my concern about the recent cutting back of services proposed by Care New England. I graduated from the Internal Medicine residency program in Memorial Hospital in July 2012 and have been practicing as a primary care physician in Pawtucket Rhode Island. I am concerned about our undeserved community of Pawtucket and Central falls. I am concerned the loss of the hospital will negatively affect the health of our low income community.

Sincerely,

Salaheldin Elhamamsy, MD.

Clinical Assistant Professor of Medicine, [REDACTED]

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**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 09, 2016 10:22 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Cc:** Dexter, Michael (DOH); Powell, Sandra (DOH)  
**Subject:** FW: comments on Care New England's (CNE) proposed closure of the Birthing Center at Memorial hospital of Rhode Island (MHRI).  
**Attachments:** MemorialLetter.pdf

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Manya K. Rubinstein [REDACTED]  
**Sent:** Wednesday, March 09, 2016 8:41 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** [REDACTED]  
**Subject:** comments on Care New England's (CNE) proposed closure of the Birthing Center at Memorial hospital of Rhode Island (MHRI).

Dear Ms. Pullano,

I am inclosing a letter I wrote to Dr. Alexander-Scott regarding the proposed closure of the Birthing Center at Memorial. I am out of town during next week's hearings so I cannot attend the hearings in person—I wish I could!

Thank you so much for considering my comments.

all best,

Manya

Manya K. Rubinstein  
[REDACTED]

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 09, 2016 10:20 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Cc:** Dexter, Michael (DOH); Powell, Sandra (DOH)  
**Subject:** FW: Memorial hospital birthing center

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Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** [REDACTED]  
**Sent:** Tuesday, March 08, 2016 6:53 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial hospital birthing center

I feel this would be a great disservice to this community as well as surrounding communities to close the Memorial Hospital birthing center. Please keep it open!  
Thank You,  
L.A. Woynar  
Sent from my iPhone

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 09, 2016 10:20 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Cc:** Powell, Sandra (DOH); Dexter, Michael (DOH)  
**Subject:** FW: Keep The Birthing Center at Memorial Hospital Open

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Julie Napoli [REDACTED]  
**Sent:** Tuesday, March 08, 2016 8:55 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Keep The Birthing Center at Memorial Hospital Open

To Whom it May Concern:

We specifically chose Memorial Hospital for the birth of our son. We started our prenatal care elsewhere, but switched to Memorial when it became clear that our birthing experience elsewhere would not be what we wanted. Memorial Hospital offered us an experience that made us feel seen, heard, and respected. Everyone listened to our wants and needs as parents and our wants and needs for our child that we did not feel was available at any of the other area hospitals. While we felt like a number at other hospitals, we were given information, compassion, choices, and a memorable and wonderful birthing experience at Memorial. Friends who chose other hospitals in general have far worse birthing stories than we have. We feel blessed to have had this option and it would be a tragedy for parents to no longer have this choice. Parents and children deserve the best. The Birthing Center at Memorial Hospital is the best.

Best,  
Julie Napoli  
[REDACTED]

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 09, 2016 10:21 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Cc:** Dexter, Michael (DOH); Powell, Sandra (DOH)  
**Subject:** FW: Memorial Hospital Birthing Center

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*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Doriann Leav [REDACTED]  
**Sent:** Wednesday, March 09, 2016 7:33 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital Birthing Center

Hi,

My name is Doriann Leav I'm a resident of Pawtucket since 2001. Memorial Hospital has always been my hospital of choice. My primary care physician is at the family care center. Everyone I see is affiliated with Memorial.

In Jan of 2012 I received the news that we were expecting our 2nd child. Due to my medical problems my pregnancy was labeled high risk. Thru the help of Dr. Amity Rubeor and Dr. Susanna Magee I was able to have a normal pregnancy.

On Oct 28 2012 I was admitted at Memorial for my inducing due to my medical problems. From the moment I stepped foot in the maternity ward I felt welcomed. The staff the nurses the Dr's were unbelievable.

My son was born on Oct 31 2012 by emergency c section. During my time of labor which lasted days. The nurses went above and beyond for myself and my husband. Making sure that all my needs were met and that I was comfortable.

I'm sad and heart broken that the committee would even consider closing such a valuable place. I can't thank the staff enough for everything they did for me and my family.

Pawtucket needs this hospital where can we go to feel like home and get the best care?  
In an emergency I know that Memorial is close by and that I'll get the best care.

I am unable to attend the meetings to to medical issues. At the time I'm writing this I am in fact admitted to Hodgson 5. I've been here more than a week. Once again the staff has been incredibly easy and wonderful.



If you have any questions or concerns please feel free to email me. And if there's anything else I can do please let know. This a valuable landmark to Pawtucket and the community.

Thank You

Sincerely,  
Doriann Leav

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Sent from Yahoo Mail on Android

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 10, 2016 3:22 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Proposed closing of MHRI Birthing Center

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Lauren Sisson [REDACTED]  
Sent: Thursday, March 10, 2016 3:17 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Proposed closing of MHRI Birthing Center

To whom it may concern,

In light of all of the recent events regarding the proposed closure of the Birthing Center at Memorial, I felt compelled to reach out about this issue.

I had my first child in 2012 at Women and Infants Hospital. The experience was very clinical in nature. I was induced, for no good reason, but was naive to childbirth and did not question the providers intentions. I was 38 weeks pregnant, not dilated, not ready to have a baby. The staff increased my pitocin rapidly until my son went into distress, and they wheeled me back into the OR for a cesarean. I was not treated as person, but more like an object. The anesthesiologist (an African American woman....I don't recall her name) told me to "be quiet and let the man do his job" when I nervously asked when I would be done with the surgery. I did not get to hold my son for 2 hours post op. The postpartum nurses were busy, impersonal, and scolded me for falling asleep (a light sleep!) with my tiny newborn on my chest. The entire experience left me in immense pain, and with over a year of postpartum depression/PTSD. I have never stepped foot in that hospital since, and vowed to give my next baby a better start.

When I discovered I was pregnant in January 2015, I researched all of my options. I wanted a VBAC and I did not want any interventions or drugs. The ONLY hospital in our state that is completely VBAC supportive, natural birth supportive, and family centered is Memorial. I was never laughed at or mocked for my choices, and I was treated like a person and not a number. The two hospitals closest to me (South County and Newport) both have mandatory surgery protocols in place.....aka "VBAC bans." My natural birth experience with Dr Morton and the nursing staff at Memorial was one that I will remember my whole life. \*

Closing this special place will leave myself, and many other mothers, to plan future births out of state. It will also increase health disparities for underserved populations in RI that rely on Memorial for personalized, unbiased care.

As a mother, woman, RN, and former CNE employee, I can only hope that Rhode Island will continue to give women the option for choices in childbirth by keeping the Birthing Center open.

Sincerely,  
Lauren Sisson



Sent from my iPhone

The effects of eliminating programs at  
Memorial Hospital of R.I

March 11, 2016

Many elderly can't get to the new sites of care offered by Care of New England. They don't drive out of Pawtucket or on highways to get to the new facilities that Care New England is offering to Providence or Northern R.I. Kent County and other CNE hospitals in R.I.

Care New England discriminates the elderly's of Pawtucket.

Memorial was a community hospital who was dedicated to the care and population of Pawtucket and the surrounding communities.

We the elderly of Pawtucket are very well aware that Care New England is a profit organization and not taking in consideration the elderly that reside in this community. It's very SAD really SAD situation to think that CNE is moving the care needed from the community of Pawtucket to Kent County and Providence areas.

Care New England goals is: profits not patient care services.

We need patient care in Northern R.I. and surrounding communities that offers a full emergency room, intensive care unit and more than one day stay in the hospital and don't forget our birthing unit.

Care New England needs to review what patient care means.

Pauline Benjamin

**Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 11, 2016 3:48 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital  
**Attachments:** Care New England.docx

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*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

---

**From:** Ronnie & Pauline Benjamin [REDACTED]  
**Sent:** Friday, March 11, 2016 3:20 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital

Paula,

I'm sending an attachment on the Effects of Eliminating programs at Memorial Hospital of R.I.

Pauline Benjamin

## **Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 12:00 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Let's join together for the rights of all women

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Amy Farkas Karageorgos [REDACTED]  
**Sent:** Monday, March 14, 2016 11:54 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Let's join together for the rights of all women

Dear Sir, Madam,

I am writing to urge the Department of Health to call on Care New England to keep the Birthing Center at Memorial Hospital open. I live here in Providence and have worked for UNICEF internationally for more than 8 years. I am appalled to see that the rights of local women are being jeopardized by mismanagement and poor allocation of funds in my home country, which many believe is one of the most advanced in the world when it comes to woman's rights and their access to health services.

As you know and I quote "every woman has the right to choose her birth setting from the full range of safe options available in her community". It is up to our Government to follow international norms and standards, through the RI Dept of Health. In this regard, it is your role to protect the rights of women who reside in Pawtucket, as well as women like me who choose to travel from other cities to deliver in an environment where I have confidence my rights will be protected.

I am asking you to see that Memorial Hospital's Birthing Center is the only one in the state that can truly address our rights and the health disparities we face in Rhode Island. Let's make Pawtucket rise above the statistics and show what can be done when a community comes together to support the rights of women and children and invests in a better future.

We call on you to ensure the rights for every woman in Pawtucket continue to be realized. That children who live in Pawtucket will be born in Pawtucket.

I truly hope I will not be in a position to use this as an example of what not to do when I am working internationally with other Governments.

Best regards,

Amy Farkas Karageorgos



**Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 11:28 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Birthing Center at Memorial

*Paula Pullano*

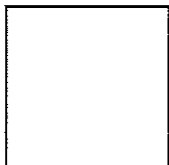
Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Paulette Butler [REDACTED]  
**Sent:** Monday, March 14, 2016 11:25 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Birthing Center at Memorial

The Dept of Health/RI should insist that Care New England keep the Birthing Center at Memorial Hospital open!

Thank you!

Paulette Butler





## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:38 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Comments regarding the pending obstetrics closure at Memorial

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Janika Arel [REDACTED]  
**Sent:** Sunday, March 13, 2016 7:05 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Comments regarding the pending obstetrics closure at Memorial

I am heartbroken for the future generation of Mothers who will be robbed of the opportunity to deliver a baby at Memorial Hospitals birthing center. To think that the last babies name scrawled across a yellow leaf this week could be the last name ever written there brings tears to my eyes. My heart aches at the thought that no more souls will be brought into this world through Pawtucket. Memorial Hospital on it's way to being another dusty ,abandoned building in a once prosperous city.

I can't begin to imagine the fear and disappointment from Mothers who have scheduled deliveries there this coming year. How scared they must feel to be displaced during a time that is already filled with anxiety. Forced into choosing hospitals they did not consider good enough to have babies in all because birthing babies is not making CEO's rich.

I feel blessed to have had all three of my babies at Memorial. A place I chose because it was the most supportive, progressive option in the state of Rhode Island. My sympathy is now with all the other woman, who are forced out into hospitals with second rate birthing experiences. Who will be forced to request gentle cesareans instead of expecting them, who will feel judged when they choose more natural means of delivery, and who will no longer have the option to soothe labor pains in a birthing tub.

This Friday while driving home from my Grandmothers home in Pawtucket I got stuck in random 95 traffic, and I thought to myself how many times will a Doctor miss their patients baby because they are stuck in random middle of a Friday 95 traffic? How many Moms will end up in labor, and stuck driving miles and miles away, because the transfer of the birthing unit was so necessary for Care New England?

Most of my friends who birthed at Woman and Infants were told by Doctors that they get who ever is on call for labor..... Do you know who was there every time I was in Labor? My Doctor. The Doctor who had been with me through every pre natal appointment. The Quality of care will be diminished if you allow Care New England to transfer obstetrics services, because you can't expect the Doctors to always make it from Providence to Warwick in time, and what happens if two patients at two different hospitals are in labor at the same time? Someone is getting stuck with someone they have no relationship with. That situation would have never happened had the birthing center stayed open.

This is a devastating blow to woman's health care in Rhode Island.

Why hasn't Care New England marketed it's unique services at the birthing center instead of complaining about how little profit they bring in? Memorial offers things no other hospital in the state has. The Doctors have some of the most progressive and caring methods in obstetrics around! Why has that not been promoted? How can they force woman into choosing mediocre care during the most pivotal point in their lives!?

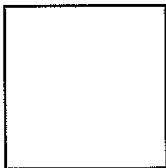
Taking the birthing center away from Rhode island is a grave injustice. It is a disheartening example of what happens when corporations put profits before people. To rip this choice away from families is cruel beyond measure. We need more places like the birthing center in the state not less.

Thank you for taking the time to read this, and I hope all this public out cry is not in vein. If there is power to stop this closure it should be used for the greater good of our state.

Thank You

Janika Arel

#borninthebucket #birthedinthebucket



## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:37 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Closure of birthing center

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** [REDACTED]  
**Sent:** Sunday, March 13, 2016 9:39 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Closure of birthing center

Good morning

My beautiful granddaughter Lilith was born at this very special birthing center. In this day of fast paced hurried medical treatment, memorial makes the childbirth experience a caring, comfortable, and completely amazing time for parents, fist time, and experienced alike.

I feel that closing this facility would be a huge mistake. Please reconsider! There are families that need Memorial.

Thanks for listening!

Kathy Joyce

Sent from my iPhone

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:36 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: MHRI Obstetrical Unit

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** meagan coelho [REDACTED]  
**Sent:** Saturday, March 12, 2016 4:43 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** MHRI Obstetrical Unit

Ms. Pullano,

I am emailing to voice my opinion on the possible closure of Memorial Hospital's Birthing Center.

I feel the closure would result in a humongous loss for the surrounding community. Having birthed 3 of my children there, I know first hand the quality of care provided at this hospital unit. I could say a million great things about the entire staff and experience but am well aware others have great experiences with every hospital they go to. My main issue with the potential closure is the way CNE has handled it and the blatant disregard for the patient centered care that the birthing center at MHRI has provided for several decades. I am not okay with so many losing their jobs and having their livelihoods shaken up at such short notice. I also cannot imagine a birthing center located in a widely known lower income neighborhood being moved to hospitals several miles away. If patients needing care are unable to get to those hospitals they may not receive the care they truly need. It would be a shame for the hospital to close. It would make sense to me to advertise the hospital and its birthing center models more in hopes of bringing more business to the center. Women need more choices of how they want to give birth. They do not want to lose the familiarity of the birth center they and their parents have birthed at.

Please help us keep the center.

Sincerely  
Meagan Coelho

**Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:42 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Comments regarding Memorial Hospital's Reverse Certificate of Need Proposal for Obstetrics Care  
**Attachments:** Letter of Support for Memorial Hospital Birthing Center - RIDOH.pdf

---

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Dulari Tahbilda [REDACTED]  
**Sent:** Monday, March 14, 2016 9:34 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Comments regarding Memorial Hospital's Reverse Certificate of Need Proposal for Obstetrics Care

Good Morning,

Attached are comments that I would like to share with the RI Dept of regarding Memorial Hospital's Reverse Certificate of Need Proposal for Obstetrics Care.

Thank you,  
Dulari

--

[REDACTED]

March 14, 2016

Rhode Island Department of Health  
Center for Health Systems Policy and Regulation  
3 Capitol Hill, Providence, RI 02908

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Dear Rhode Island Department of Health,

We are writing to express our concern and disapproval of Memorial Hospital's Reverse Certificate of Need proposal which proposes a closing of the hospital's Birthing Center.

Dulari gave birth to our son at Memorial Hospital just over four years ago, in December 2011. We did not initially plan to give birth at Memorial, but we will forever be grateful that circumstance led us there.

Dulari had been receiving prenatal care from a wonderful group of midwives and had been planning to deliver at Women & Infants ABC unit. However, during a routine check-up in Dulari's 36th week of pregnancy, we learned that she had placenta previa and would have to have a cesarean section - likely within the following 10 days. Once we learned that prenatal care by midwives - with whom we had developed relationships for 8 months - would now have to be taken over by an obstetrician within a matter of days, we were caught off guard and immediately sought advice from our doula and friends from our birthing class about doctors they recommended. We absolutely did not want to be assigned to a doctor simply based on schedule availability. However, it quickly became clear through a series of phone calls that this was the default course of action at Women and Infants Hospital.

After receiving several enthusiastic recommendations for Dr. John Morton (e.g. "he's more midwife-y than any midwife I've ever met!"), Dulari called his office. We were skeptical that we would even receive a call back because it was just a few days before Christmas. We were incredibly surprised, relieved and grateful to receive a call back within hours directly from Dr. Morton.

Not only did Dr. Morton address our questions and concerns about placenta previa over the phone and agree to take Dulari on as a last minute patient, but he invited us to take a tour of the Labor and Delivery Unit the next day and to meet the head nurse. After that initial phone call, Dulari's anxiety level started to decrease but we still felt unprepared for this sudden change in pregnancy and birth plan. We visited Memorial and were received with an unprecedented amount of love, care, and empathy. After spending nearly two hours with us during our visit, both Dr. Morton and the nurse assured us - and we felt confident - that Dulari and our soon-to-be-born baby would be in good hands.

Aside from the personalized attention we received, the most important factor for our choosing Memorial for the birth of our child was its pioneering method of "gentle cesareans." Having prepared diligently for natural childbirth, learning that a cesarean was our only option for a safe childbirth was a big adjustment for us. However, the practices that Dr. Morton and others have mainstreamed at

Memorial, which wouldn't have been afforded to us Women and Infants, made the adjustment easier to take on. Still feeling empowered about our choices in childbirth, we were grateful for:

- including two people (Keith and our doula) in the operating room during childbirth;
- being confident that the attending medical professionals would have their full attention turned to us and our baby throughout the entire procedure;
- knowing that our baby would be brought to Dulari's chest immediately upon birth for an irreplaceable first moment of skin-to-skin contact and bonding between mother and child;
- having Keith be next to and with our baby when/if he needed to be warmed and be the first to swaddle our child with the loving warmth only a parent can provide;
- bringing and playing our own music in the operating room;
- being consulted respectfully about our preferences and feelings throughout the entire childbirthing process;
- and immediate and ongoing support to ensure success with breastfeeding.

These important details of our childbirthing experience are prominent in our memories and have become part of our family history. The closure of the birthing center at Memorial Hospital would not only tarnish these memories and this history, but also those of countless other families. Out of honor and respect for the families who have been well-served by the hardworking staff of Memorial's Labor and Delivery Unit, and in the service of future families from across RI and southeastern MA who stand to benefit similarly, we implore you to keep this important institution open, vibrant, and supported.

Sincerely,

Dulari Tahbildar and Keith Catone

[REDACTED]

**Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:41 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Birthing Center at Memorial Hospital

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Beth Rodio [REDACTED]  
Sent: Monday, March 14, 2016 7:14 AM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Birthing Center at Memorial Hospital

I urge the Department of Health to call on Care New England to keep the Birthing Center at Memorial Hospital open.



## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:39 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** Debbie [REDACTED]  
**Sent:** Sunday, March 13, 2016 8:54 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital

Please realize that the closing of the Birthing Center along with other units will be a major mistake. Memorial is not telling the truth on why they really want to close the unit. The Orthopedic unit which is located in the Richardson Bldg, which used to be another patient floor, which was renovated just for them has decided they don't like that floor anymore & they now want the floor that the Birthing Center is located on which was upgraded just for the fantastic Birthing Center. Mr Keefe & his cronies are not thinking of the patients - they are thinking of padding their pockets even more. Hopefully the Dept of Health has more common sense & puts the patients first. Please don't let the Birthing Center close. Please don't listen to CNE who should not be called CARE New England because they don't care at all. (Orthopedics could have any other floor - Wood 4/Children's unit which they closed, Wood 5, patient floor, which they closed, Wood 6, patient floor which they closed or they even have 555 Prospect St which is just down the street from them & which Memorial owns & which is office space. So why give up the Birthing Center????? Thank you in advance. Thank you for listening.  
Sent from my iPhone

## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 9:38 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital's Birthing Center

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Vogel, Rachel [REDACTED]  
**Sent:** Sunday, March 13, 2016 8:31 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital's Birthing Center

Dear Ms Pullano at Rhode Island's Department of Health,

My name is Dr Rachel Vogel and I am a graduate of the Brown Maternal and Child Health Fellowship (2009-2010), based at MHRI's birthing center. It is a unique place, where family physicians like me can get further training in obstetrics along with obstetricians, midwives and family physicians.

My multidisciplinary training was evidence based, and an essential stepping stone to my future career. Currently, I continue to practice obstetrics as a family physician in an underserved community in Somerville MA, as well as teach maternal and child health to Tufts medical students, Harvard medical students and Tufts Family Medicine residents. My fellowship has given me the skills and confidence to do this effectively. There is only one other similar fellowship in all of New England, so the loss of the MHRI birthing center would have a huge impact on future family physicians hoping to practice and teach obstetrics.

I encourage you to consider the recent events and urge Care New England to keep this wonderful birthing center open. Many future family physicians depend on this center, as well as countless patients.

Thank you very much,

Dr Rachel Vogel

[REDACTED]

## **Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 14, 2016 3:11 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Please Keep Memorial Open // First-time Mom.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Erin Corry [REDACTED]  
**Sent:** Monday, March 14, 2016 3:06 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Please Keep Memorial Open // First-time Mom.

Hi Paula,

I urge the Department of Health to call on Care New England to keep the Birth Center at Memorial Hospital open.

I am a first-time mother, 19 weeks pregnant. My husband and I live in the South Side of Providence and we have been looking for healthy birth options for our new baby! We are hoping to birth with the Rhode Island Home Birth midwives, and Memorial's Birthing Center is what ensures that home birth remains a safe option in Rhode Island (they have a long standing trust and respect of home birth and that is where we would go if for any reason I needed to be transferred for more care). We need facilities that see birth as a natural body process, trust women's bodies and understand the psycho-emotional aspects that can greatly impact a woman's experience in childbirth. Memorial is the only hospital in Rhode Island that understands these aspects SO well *and* offers these amazing services to my low-income neighbors, friends and kids. That's the kind of progressive health care we need to be modeling, not shutting down.

This is a historical move in the healthcare story unfolding in Rhode Island. Please fight for the underdog here. Please keep this birthing center open.

I am trusting you with this decision,  
Erin Corry

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 3:12 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital Closing

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** [REDACTED] On Behalf Of Ucik, Laura  
**Sent:** Tuesday, March 15, 2016 2:41 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Memorial Hospital Closing

Hello,

My name is Laura Ucik; I am a current 3rd year medical student at Brown Medical school, and have have worked at Memorial Hospital, the FCC, and the Birthing Center in the past. I'm also a future primary care provider who had been considering remaining in RI to train in Pawtucket at Memorial's Family Medicine program.

I am awestruck by the announcement of the closings, and I am devastated. I do not understand why the profit motivations of Care New England are more important than the health and well being of those in Pawtucket and surrounding areas. I do not believe Miriam, RIH, and Kent Hospital can adequately serve their needs, both for geographic reasons and because of their atmosphere and approach to healthcare. They are fine institutions but no replacement for Memorial Hospital, on which the community depends heavily to provide comprehensive, loving, and evidence-based care.

Finally, this closure removes the opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help contend with the terrible national shortage we are currently experiencing?

This is a great harm to both patients now and patients of the future as we continue to lose future PCPs to more lucrative specialties.

We have a current subinternship in colorectal surgery (among several others under surgery), but not a single one in family medicine. What does this say about our healthcare priorities as a city?

Thank you for your consideration and your efforts on this dire matter  
Laura Ucik  
MD2017  
[REDACTED]

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 4:40 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: PLEASE stop the closure of the Memorial Hospital Birthing Center

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** VyVy Trinh [REDACTED]  
**Sent:** Tuesday, March 15, 2016 4:32 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** PLEASE stop the closure of the Memorial Hospital Birthing Center

Dear DOH:

I am a current medical student at Brown Medical school, and have have worked at Memorial Hospital, the FCC, and the Birthing Center in the past.

I urge you not to close the Birthing Center at Memorial Hospital. The Birthing Center offers families the care we seek and demand: high-quality, compassionate, and evidence-based. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country.

Kent and Women and Infants hospital are fine institutions but cannot replace Memorial Hospital's birthing center, on which the community depends heavily to provide comprehensive, loving, and evidence-based care.

Finally, this closure removes the opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help address the national shortage we are currently experiencing?

This closure will cause great harm to both current patients and patients of the future.

At Brown Medical School, we currently have a subinternship in colorectal surgery (among several others under surgery), but not a single one in family medicine. What does this say about our healthcare priorities as a city?

Thank you for your consideration and your efforts on this dire matter.

VyVy Trinh, MD'17  
[REDACTED]

## **Shelov, Elizabeth (OHHS)**

---

**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 10:20 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Don't Close Memorial's Birthing Center

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Cris Monteiro [REDACTED]  
**Sent:** Tuesday, March 15, 2016 9:24 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Don't Close Memorial's Birthing Center

Dear Ms. Pullano-

I am writing to register my opinion that the closure of Memorial Hospital's Birthing Center/Obstetric Unit would have negative impacts for the women and families of RI for whom this is a valuable resource. Having attended a birth myself at Memorial's Birthing Center, I can attest to the high quality of care given there. This care would be negatively impacted for people living nearby the hospital as well as all over the state. Memorial's Birthing Center has gained much popularity and renown over the years that it has been open, I hope that the DOH will urge Care New England to find a way to keep this resource open.

Thank You,

Cris Monteiro

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 10:19 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Closing of MHRI

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Linda Cookson [REDACTED]  
Sent: Monday, March 14, 2016 11:12 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Closing of MHRI

I am a 27 yr employee of memorial hospital and I recently left for a new job. I worked 10 yrs in icu and 17 in recovery room. There are a lot of problems with the management of the hospital going way back even before Care New England took over but the hospital was always able to serve the community of Pawtucket and surrounding communities. The people that come to the hospital have always received premium care. My fellow co workers and I always brought our family members to be treated there. Family members with cancer receiving treatment surgical procedures that are elected to be done or visits for children to be seen and treated. A lot of our patients would have to take a bus to get to Hasbro together treated. Both my parents died at the hospital. It isn't just about a birthing center it is about a place to go that is ours and accessible. Please consider keeping it open for the community that needs it. Linda Cookson RN  
[REDACTED]

Sent from my iPad

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 10:17 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Birthing Center at Memorial Hospital

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Jacqueline Sullivan [REDACTED]  
**Sent:** Tuesday, March 15, 2016 9:31 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Birthing Center at Memorial Hospital

Dear Department of Health, :)

I oppose the closing of the Birthing Center at Memorial Hospital. I live in the Oak Hill area of Pawtucket and gave birth to my son at Memorial in 2014. It was such a great experience that I feel it is important to raise my voice along with all the other mothers that have had the pleasure of giving birth at Memorial Hospital.

The care with which my entire family was given during this important time was a blessing. When first researching natural childbirth in the RI area I read reviews online and did a lot of research because this was an important decision for my family. I had to change my doctor in order to deliver at Memorial. This was not a decision I took lightly.

Upon research I learned that W&I does have an "Alternative Birthing Center", but upon further research I learned that many women get "opted out" of the "ABC Center" quickly if there are even the slightest concerns. Since I was giving birth at the age of 35, I was considered "advanced age" and would be opted out of having this available to me.

I read reviews of Memorial Hospital being great for natural childbirth, but had not heard anything about it personally. It is unfortunate that there was not more marketing put into promoting the Memorial Birthing



Center. This is unfortunately the first time that many are hearing about the great nurses, doctors, staff, community and natural childbirth options available at Memorial. The nurses and doctors at the hospital were so informative and alleviated much of my worries as a first time mother. The staff brought great information and insight to us first-time parents (thank you to the teachers of the birthing & breastfeeding classes)!

All the books about “natural childbirth” talk about “fighting the hospital establishment which encourages interventions” so I was prepared for a fight when discussing with my doctor about the decision to have natural birth, and if need be a “gentle cesarean”. My doctor said, “we encourage and celebrate natural childbirth at Memorial Hospital and Gentle Cesareans are the only kind that we perform”. I was so relieved! I didn’t have to fight to have the natural childbirth that I wanted!

With the help of my doula, doctors and the nursing staff at Memorial I was able to have absolutely no interventions and the most natural childbirthing experience I could have. I was fully healed within the day and felt so good about having the experience I did. The nurses and staff showed us everything from how to swaddle our baby, breastfeeding positions, and even different ways to burp him! They checked in constantly, always with a smile and deep concern and care for any questions we had. They were an amazing resource and it would be unfortunate to lose this amazing Birthing Center as an option for families in RI and the surrounding area.

We thank you from the bottom of our hearts for considering this issue,

Jacqueline & Michael Sullivan (along with our son Declan)

My name is Kristen Kardos; and I am an educator, a postpartum doula, co-founder and group facilitator of pregnancy and new moms groups at Rhode Island New Moms Connection, co-chair for the OB Patient Advisory Council at Women & Infants, and a mother of three children, ages 6, 8, and 10. I have a decade of experience working with pregnant women and families in RI. Personally, I had two births at W&I and birthed my third child at Pawtucket Memorial. I won't get into what was dissatisfactory about my experiences at W&I, but I will say that I am passionate about improving care for women birthing at W&I and appreciate the opportunity to serve on the Patient Ob Advisory Council. I feel my voice represents the voice of many women I've had the pleasure of supporting throughout the years.

I am disappointed that Care New England intends to close the birthing center and ICU at Pawtucket Memorial Hospital. Not only does Memorial allow access for many families in Pawtucket and Central Falls who might otherwise find themselves challenged by our limited bus schedule, but women from all over RI and MA would be denied the opportunity to birth in a place where evidence based, patient-centered care and gentle cesareans allow for patients to feel supported in a way other hospitals can't compete. Due to the high volume of births at Women and Infants, patients often feel "rushed" to have their babies and are given medications to speed things along. Just last week a mama in my group went to W&I and was told at 4cm dilated that she'd be birthing in triage that night with no access to an epidural. She decided to then leave the hospital and felt tremendous stress at the idea of delivering in triage. My sister in law delivered in triage last October so I know that this is a possibility for women at W&I. I have never heard of Memorial being too busy for women to access a room; and the calm nature of the hospital allows women and care providers to listen to mama's body and baby's response to labor-and not rush the natural process of birth. Access to this kind of care in Pawtucket is so important! Maternity care and birth is not a one-size-fits-all; and knowing that Memorial Hospital offers a birthing center atmosphere, where gentle cesareans are the "norm", where volunteer doulas might be available, where practitioners have time to listen and support families without rush, where one can be vulnerable and trusting - THIS attracts many women to Memorial.

Care New England claims on their website "*We are focused on providing a safe, positive and supportive environment for your birth experience, and all of us will be working with you to ensure it.*" If this is true, and if the department of health supports access to medical care and treatment for diverse communities within our state, Pawtucket Memorial's birthing center must remain open!

Pawtucket Memorial is good for Pawtucket! There are talks of 200 people losing their jobs. We need to work together to create more jobs, not less, more access to health care, not more challenges, more options for birth in RI, not fewer. Considering the attendance at the rally last week and the people showing support at these hearings, I know the community is speaking loudly: Pawtucket Memorial, and both it's birthing center and ICU, is a valued health care facility in our state.

I am a doula and educator and work with families in RI to help them advocate for themselves and their families, and an interdisciplinary journalist who over the past decade has made a body of work about maternity care in Southern New England. The role of a doula is to provide multi-faceted support to families as they traverse the many complex elements of pregnancy, birth and parenthood. In this way I have had the opportunity to witness and learn about the many parts of maternity care that deeply effect the physical, mental, and emotional health of parents and children.

Doulas and public health officials know that culturally competent, personalized and respectful care is extremely important to women who live in communities in which access to high quality healthcare is a challenge. A few barriers to care for women and babies in medically underserved communities like Central Falls include transportation, which testimony has clearly painted a picture of. Women in these communities may fear of authoritative systems of knowledge that may undermine community beliefs they hold about health. Many women sustain histories of trauma that make trusting providers difficult and fear of judgment an inhibitor to seeking care. Lack of time not occupied by working low wage jobs, also prevents vulnerable pregnant women from seeking care. RI health data clearly states this to be an issue for Pawtucket families- with delayed prenatal care with the whole population in Central falls at 15.9% 18.7% for

black women. These are only a few of the barriers that exist for families in Pawtucket and Central Falls that I see as a doula and journalist.

The Birthing Unit at Memorial Hospital has a unique culture of care in which the most vulnerable women and babies of this core urban RI community are treated with the same respect and care that families of privilege seek out. The nurses, doctors and midwives at Memorial have tirelessly worked to create an environment that meets the needs of its patients with understanding of the unique its challenges.

In the changing landscape of modern maternity care- we must consider the health of babies and mothers as the most important piece in regards to the long-term health of our nation. We know that our national community has been challenged to provide care that creates equal opportunity for lifelong health for all American families, with women of color and their children at highest risk.

If our RI health community is going to combat the plague of premature birth and infant loss and the lifelong health issues that begin in utero, if we are going to shift the trend in outcome that shames America in comparison to other developed countries in regards to maternal mortality. We must confront the racial disparities that begin with access to care. Consolidation of Memorial's OB unit will increase barriers to care.

If we are going change the outcomes for American women of color and babies and other vulnerable Americans- we must protect the high quality, culturally appropriate, accessible maternity that exists within communities and invest in it. We must not succumb to the myth of the bottom line- in which the greed and ambition of large health care institutions can eclipse the progress and unique care that community based health provides. Memorial Hospital's birthing unit one such place, please consider this carefully as you make your regulatory decision. Thank you for allowing the community to speak out in regards- especially you Dr. Alexandra Scott who shares our goals in regards to the health of RI's most vulnerable community members.

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I have two children; my 4 yr old was born at W & I, while my 9 month old was born at Memorial, both birth experiences were as different as the hospitals that delivered them.

Memorial Hospital and other RI hospitals provide two very different birth models and should not be considered one of the same. Many RI hospitals see birth as a medical procedure where intervention is common practice even when it is not necessary but instead used to move things along to meet a desired time frame. Many of these interventions can cause a more intense labor, stall labor, or increase the need for a c-section.

Memorial is very unique in RI as they follow a more natural, evidence based, mother-friendly model. Memorial doctors, nurses, and midwives support mothers both physically and just as important mentally. It is common practice to encourage natural birth, the use of doulas, movement, and as little intervention as possible so the mother can labor as her body encourages her to do so. *More important the mother has a choice on how she would like to labor.* At Memorial I was comforted knowing who was going to be delivering my baby as it would be 1 of 2 amazing doctors who I had learned to trust through repeated visits, unlike my experience at W&I where my delivery could be 1 of a dozen doctors I had only met once.

I also felt my care after delivery was very different between the two hospitals. At W&I I felt that my care was less personalized and rushed probably due to the volume of patients and available staff. Quantity does not benefit the quality of care unless the appropriate resources are available. I desperately needed help establishing nursing but was told that assistance wouldn't be available until my day of discharge due to the demand of lactation help needed. I felt I spent 2 days starving my baby because I couldn't get the help I needed. Memorial surpassed my expectations. The care I received by the nurses and doctors were nurturing and supportive. They took the time to talk with me about my concerns or needs and I felt they truly cared. Again I needed lactation help but this time I had the support I needed from many of the crossed-trained nurses at Memorial. Memorial should not be closed but should be used as a role model for other hospitals to learn from and strive to become.

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 16, 2016 3:02 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: The Memorial Birthing Center is VERY important to me and my family

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Maria Martinez [REDACTED]  
Sent: Tuesday, March 15, 2016 4:56 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: The Memorial Birthing Center is VERY important to me and my family

Hi Paula,

My name is Maria and I am writing to tell you that the birthing center at Memorial is VERY important to me. I had my first child, my daughter Simone, at home, safely, wonderfully, and with the knowledge that my birthing choice was accepted and supported by the mainstream medicine within my community at Memorial Hospital.

The fact that my midwives have privileges at Memorial and I was able to tour the facility was a huge factor in my decision to have a homebirth. I met several doctors during my tour of the center, and I got the distinct feeling that not only were my midwives accepted, but celebrated as part of the community of care offered at Memorial. I felt secure that I would be welcomed at Memorial if, at any point during pregnancy and labor, I risked out of a home birth, or if I needed a transfer, that my midwives would be able to provide continuity of care, and that I would be welcomed at Memorial. I did not feel judged, or marginalized because of my choice to pursue a homebirth.

Please work to keep the birthing center at Memorial open. It was part of my network of safe, wholesome, humane care during my pregnancy and labor. Please do not let my options for care dwindle. Please do not let homebirth midwives get pushed out of mainstream modern medicine. I support the birthing center at Memorial, and I am advocating for it to remain open and available to those who need it. I am urging you to do the same!

Thank you,  
Maria Martinez  
[REDACTED]

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 16, 2016 3:03 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: In support of Memorial Hospital Birth Center

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Rachel Chiartas [REDACTED]  
**Sent:** Tuesday, March 15, 2016 7:54 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** In support of Memorial Hospital Birth Center

To Whom It May Concern,

The birthing center at Memorial Hospital is not only a special place to me, but it is to so many women around Rhode Island. There are a multitude of reasons why mothers and fathers across this state are “up in arms” about the recent news of the center’s possible closing. We need more places for women to safely and peacefully birth their babies, not less. Soon-to-be mothers love Memorial’s birth center for the ease, calm, quiet, and trust they feel when visiting, laboring, or birthing there. Women want and need their birth to be honored as a special time in their life. They need to feel respected and empowered, and they need to trust the doctors and nurses attending to them. The staff and environment at Memorial embody all of these qualities. Walking onto the floor of the birth center almost feels like a home away from home. There’s a sense of calm and quiet that can be felt immediately. A laboring mom does not want to feel like she is in the midst of a medical emergency, hurried and rushed; she wants to feel comforted and safe. Thank goodness for Memorial Hospital for providing this special place.

When I was choosing where I would birth my second son, I had to choose carefully. I would be preparing for a VBAC (vaginal birth after Cesarean), and the decision of birthing location could not be taken lightly. My first birth ended with a Cesarean, but I was not among the small percentage of women who needed one for an underlying medical condition and I did not intend to have another one. There was no known reason I could not birth my second child the way my body intended. I was healthy, strong and prepared to birth vaginally. After visiting Memorial Hospital’s birthing center, I knew without a doubt that I had found the next best place to home in which to bring my child into the world. It was evident that the staff truly understood birth not just from a medical perspective from a women’s perspective as well. They trust women, even women who are trying to VBAC, in their ability to have a healthy birth with minimal interventions. They have amazing comfort measures



available to women during labor. They know when to intervene and when to follow a laboring mother's lead. They have an outstanding record of successful VBACs, and this alone speaks volumes. Mothers in Rhode Island deserve to have the birth center at Memorial Hospital as an option when considering where to safely bring their babies into the world. I wouldn't have felt comfortable choosing anywhere else for my babe's birth.

Sincerely,

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Rachel Chiartas

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 16, 2016 3:04 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: A unique and important hospital for birthing

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Victoria Templer Rotkow [REDACTED]  
**Sent:** Wednesday, March 16, 2016 11:13 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** A unique and important hospital for birthing

Dear Paula and Dr. Alexander-Scott,

I write to urge you to keep the Memorial Birthing Center open. I delivered my first child there this past September and cannot say enough about the incredible staff and care that I received. Among all Drs and OB practices in the Providence area, I chose my OB specifically because of Memorial Hospital Birthing Center and because I did not want to deliver at Women and Infants, where patients are treated more like numbers to get into and out of the hospital rather than mothers bringing a human life into the world.

I was not rushed in my childbirth process and was able to have a natural drug-free birth. Unlike many hospitals in the U.S. today, the default here is to have the mother's body lead the way, use delayed cord clamping, and keep the baby in room with the parents during recovery days. All of these procedures increase success of successful childbirths with little intervention, healthy immunity responses, and successful breast-feeding. The long-term health benefits of these practices for both the mother and the infant are far too numerous to list here.

The many women in the under served area of Pawtucket that would otherwise not be able to get to another hospital is reason enough to keep the birthing center open. While I do not fall in that category and come from the Providence area, I write with my own personal story of determining, after much research, that Memorial Hospital was my first choice in my childbirth experience. I am a college professor in neuroscience and spent many hours reviewing scientific literature on evidence-based practices for childbirth. There are not many places like the childbirth center at memorial hospital. Rates of cesarean c-sections have risen from 4.5% to 33% in the past 40 years and women are often forced into believing this is their only option. Even when a vaginal birth occurs the vast majority of patients are given pitocin to speed up their deliveries, more than half receive epidurals, 84% with forceps, and 77% with vacuum extraction. I do not know the statistics of these interventions at Memorial, but I suspect they are lower than the national average because the staff treat childbirth as a natural and healthy bodily function rather than an illness that needs to be treated with as many interventions as possible.

If I am blessed enough to have a second child, I am not sure where I will turn for my delivery if there is no Memorial Hospital birthing center. I do not want to have a homebirth and do not want to deliver at Women and Infants. In addition to mothers that do not have another safe childbirth option, I ask that you keep mothers like me that do have a choice in mind and chose Memorial as the best option based on their superior evidence-based practices. Please consider the unique and critical option that a birthing center like Memorial's offers for so many people in RI.

Thank you for your time,  
Victoria Templer Rotkow, PhD

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## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 16, 2016 3:05 PM  
**To:** Katelyn Edel  
**Subject:** RE: Memorial Birthing Center

Thank you for your comment, Ms. Edel.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** Katelyn Edel [REDACTED]  
**Sent:** Wednesday, March 16, 2016 1:39 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Birthing Center

Hello,

I urge the Department of Health to call on Care New England to keep the Birthing Center at Memorial Hospital open.

I was at the Community Forum in Pawtucket today (March 16th), and I have to say that I was so impressed by the show of community support. It was really inspiring, beautiful, and touching to hear from all of the voices that have been served at Memorial.

I am writing as a student, as an advocate, and as a new doula. I recently started my first year at the Brown University School of Public Health, working towards my MPH degree. I chose Brown because of the flexibility the program offered; I wanted a holistic, educational experience, and I wanted to be free to pursue the subjects that I am interested in - which definitely include maternal health, babies, and access to care.

In my program, I am focusing on the social determinants of women's health, specifically, how geography and socioeconomic status impact health outcomes. I am passionate about contributing to evidence-based research supporting baby-, mother-, and family-friendly maternity services in the United States, particularly in our nation's underserved communities.

While my academic interests alone would have led me to support Memorial, I am also personally invested in the Birthing Center. While at Brown, I realized that although I have always been research-oriented, I have also begun to feel a calling towards a more personal aspect of health. As a result, I pursued my doula certification and I am now in the process of connecting with potential moms- and dads-to-be.

When I first decided to become a doula, I was so excited about the possibility of working as a volunteer at Memorial's Birthing Center. I heard nothing but positive things about the care offered there, and I was looking forward to providing labor support to the women that needed it most. Bottom line, I want every woman to have the choice to work with a doula, and to feel supported and honored in her birthing experience. This, among many others things, is part of the Birthing Center's mission. It is truly a place of support, of love, and of heart. It is clear that the providers, the protocols,

the facilities - everything is centered around mom and baby. But looking even further, this mom and baby centered approach is provided at the community level, to those individuals that are most in need. It is for these reasons that I would be both inspired and honored to volunteer in such an environment.

And so, I write to you to consider the larger goals that the Department of Health has in reducing health disparities, and improving health outcomes for even our most vulnerable populations. I have been so impressed with Dr. Alexander-Scott's mission, and I hope that she is true to her word in this. Memorial Hospital is actively contributing to enhancing health equity already, and to shut down the obstetrical unit would severely undermine the RIDOH's strategic priorities. Please do not penalize the people of Rhode Island, specifically the residents of Pawtucket and Central Falls, by taking away this community resource. It will be a sad day if financial gain outweighs evidence-based, high quality care and the well-being of moms and babies.

I welcome any comments.

Respectfully,  
Katelyn Edel

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 16, 2016 3:05 PM  
**To:** Jessica Wilder  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** RE: Save the Memorial Hospital Birthing Ceter

Thank you for your comment, Ms. Wilder.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Jessica Wilder [REDACTED]  
**Sent:** Wednesday, March 16, 2016 1:43 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Save the Memorial Hospital Birthing Ceter

To Whom It May Concern:

I am writing to beg the Department of Health to save the Memorial Hospital Birthing Center. I understand that Care New England sees birth as simply a business. They see the nearly 500 births that currently happen at Memorial Hospital as easily absorbed by their other two existing hospitals Women & Infants and Kent. But birth is about so much more than numbers and business. Birth is an incredibly personal and emotional experience for women. It is not the same as having one's gallbladder removed. It does actually matter the setting in which it happens.

Women & Infants used to have an alternative birthing center separate from their labor and delivery unit. They closed it to make more room for expanding their MRI suite because that brought in more money. They claimed to just move the birthing center, but in reality they just turned one of their labor rooms into a "birthing center." This is outrageous and shows very well their attitudes towards natural birth. Natural birth is not a great money maker. There's no anesthesia or surgery to charge for like with an epidural birth or cesarean section. But there is so much more value in natural birth than dollars. Especially in outcomes of health and well being of mothers and babies. Memorial Hospital provides excellent, quality care and an environment supportive of natural birth, which is unfortunately and sadly the only local hospital to do so.

I gave birth to my son almost 3 years ago before I knew about Memorial Hospital's wonderful birth culture. I had worked as a midwife at Women & Infants years ago, so was particularly familiar with their overly medical model of care. I knew I could never have the birth I was looking for there so I drove all the way to the Cambridge Birth Center in Cambridge, MA for my prenatal care and to deliver my son. It was an amazing experience and was everything I was looking for... and I am fortunate enough to be in a position to have a car and have the financial means to travel such a great distance to get that kind of care (I live just over an hour away from Cambridge). I was willing (and able) to travel that far to avoid having my baby at Women & Infants.

This is not something the low-income and under-served women of the Pawtucket and surrounding communities would have the option to do. And now that I have a toddler in tow, I also would no longer be able to make the frequent hour-long commute up to Cambridge to have a second baby. Learning about the Memorial Hospital Birthing Center gave me peace of mind for planning to have a second baby. I learned that there is a wonderful local option to have the kind of birth I want to have in a safe and supportive environment.

Like I said before, I have worked as a midwife. And when I meet women for the first time and tell them what I do for a living, their faces light up and they immediately start telling me about their own birth experiences. I have met women several decades out from their childbearing years and they remember with intimate detail their birth stories. I love hearing them. And what I take away from that is just how emotional and memorable birth is for women. Please don't allow money and numbers to drive the decision to keep the Memorial Hospital Birth Center open. Please see this as so much more than a financial decision. Please recognize the overwhelming need and reliance our community has for this special and amazingly unique option for giving birth. The community will absolutely not be the same without it.

With gratitude for your time and careful attention,  
Jessica B Wilder

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 5:03 PM  
**To:** Divya Dethier  
**Subject:** RE: Please DO NOT close the MHRI Birthing Center

Thank you for your comment, Dr. Dethier.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** Divya Dethier [REDACTED]  
**Sent:** Tuesday, March 15, 2016 9:07 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Please DO NOT close the MHRI Birthing Center

Dear Department of Health,

I am a current third year medical student at Brown Medical school. I work at Memorial every week at the FCC, and have also worked in the Birthing Center.

I saw one patient recently who was full term, and about to deliver - she wanted to deliver at memorial because this is where she herself was delivered. The experiences she had there were so important to her, and it pained me to have to tell her that this may not be a possibility.

I urge you not to close the Birthing Center at Memorial Hospital. The Birthing Center offers families the care we seek and demand: high-quality, compassionate, and evidence-based. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country.

Kent and Women and Infants hospital are fine institutions but cannot replace Memorial Hospital's birthing center, on which the community depends heavily to provide comprehensive, loving, and evidence-based care.

Finally, this closure removes the opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help address the national shortage we are currently experiencing?

This closure will cause great harm to both current patients and patients of the future.

At Brown Medical School, we currently have a subinternship in colorectal surgery (among several others under surgery), but not a single one in family medicine. What does this say about our healthcare priorities as a city?

Thank you for your consideration and your efforts on this dire matter.



**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 2:32 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Comments on Closure of Memorial Birthing Center  
**Attachments:** Memorial\_Letter -DOH.docx

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*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Jennifer O'Leary [REDACTED]  
**Sent:** Friday, March 18, 2016 2:30 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofmemorialbirthcenter@gmail.com  
**Subject:** Comments on Closure of Memorial Birthing Center

Attached please find my comments on the closure of the Birthing Center at Memorial Hospital.

Thank you,

Jennifer O'Leary

My second daughter was born at the Birthing Center at Memorial Hospital in March 2015. After a traumatic birth experience at another Rhode Island hospital, I chose to come to Memorial because I believed that it offered me the best opportunity to have a successful Vaginal Birth After Cesarean (VBAC) while still having my birth preferences honored. In the event that a cesarean was necessary, I was comforted in knowing that a Gentle Cesarean was available so as not to relive my first birthing experience. A true Gentle Cesarean is not offered anywhere else in the state.

Thankfully, my VBAC was successful. I had an emotionally healing and empowering experience thanks to the wonderful doctors, nurses and staff that supported me and my husband through my entire pregnancy, labor & delivery and recovery. I was allowed to labor and ultimately deliver my baby in positions that I chose without frequent interruptions or unnecessary timetables. Unlike my first experience, I was treated with respect and given encouragement instead of being made to feel helpless and ignored.

In my opinion, the midwifery model of care which is implemented at the Birthing Center at Memorial Hospital produces less interventions and C-sections ultimately improving the health and well-being of birthing mothers and their babies. However, the lack of these procedures creates less revenue for the hospital and hurts the bottom line of the healthcare company. Unfortunately, Memorial Hospital's mother-friendly practices are not profitable for Care New England and, therefore, are not worthwhile in their eyes.

As heard in the testimonies from the Department of Health hearings, many mothers come to Memorial after experiencing a traumatic first birth and are looking for a healing, empowering experience for their subsequent births. The hospitals to where CNE proposes to move obstetrical services along with other Rhode Island hospitals follow a more traditional modern model of care. Ultimately, these practices create the need for more medical care to mentally, emotionally and physically recover from traumatic births that could be avoided if mother-friendly policies were followed and respected. For CNE, more medical care sadly equates to more money. I argue that a birth is more than a medical event. It's the beginning of a family.

The Birthing Center at Memorial Hospital is unlike any other facility in the state. My husband and I knew the care offered there was worth the drive up from Jamestown, RI. I am frightened by the thought of my next birth experience if the Birthing Center is no longer available. Every birthing mother deserves to have a choice in the type of care they receive. This Birthing Center offers a unique environment that allows mothers to have a natural birth in a hospital setting.

Please allow future birthing mothers to have this option.

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 11:50 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Comment on Memorial Hospital's Reverse Certificate of Need  
**Attachments:** Healy\_Memorial\_Birthing\_Center.pdf

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
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(401) 222-1042

**From:** Laura Healy [REDACTED]  
**Sent:** Friday, March 18, 2016 11:30 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Comment on Memorial Hospital's Reverse Certificate of Need

Dear Ms. Pullano,

I have attached a written comment regarding Memorial Hospital's Reverse Certificate of Need.


Thank you for taking the time to listen to the community's input.

Kind regards,  
Laura Healy

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[REDACTED]

Laura Healy



March 15, 2016

Dr. Nicole Alexander-Scott  
Department of Health  
3 Capitol Hill  
Providence, RI 02908

Dear Dr. Alexander-Scott:

I write to express my concern about the proposed closure of the Memorial Hospital Birthing Center. The Birthing Center plays an important role in Rhode Island, and to close it because of its small size and limited profitability would be shortsighted. Its small size gives mothers like me the choice of a more intimate alternative to the area's larger hospitals; it allows for evidence-based changes to care—such as offering gentle Cesareans as standard practice—which would be difficult to pilot in a larger setting; and, perhaps most importantly, it fosters a patient-centered ethos, which the residents who train there carry with them as they fan out to other hospitals.

I chose to give birth at Memorial because of its reputation as a mother-friendly hospital that strongly supports natural childbirth. I labored for three days, and throughout that time I was consistently treated with patience and respect. My doctors and nurses listened to me and allowed me to participate in my own healthcare decisions. In the end, I didn't get the natural birth I so badly wanted, but—thanks to the doctors and nurses at the Birthing Center—I emerged from what might have been a frightening and traumatic experience feeling educated and empowered. Although I ended up with a C-section, I didn't miss out on bonding with my new baby, thanks to the gentle Cesarean practiced at Memorial. He was placed skin-to-skin, and I nursed him for the first time right on the operating table.

I always assumed that—even if I moved away from Rhode Island—I would come home to have my next baby at Memorial. Drs. Morton and Magee value women's intelligence and respect the momentousness of childbirth. They have created an important learning environment for the residents, nurses, doulas, and mothers who pass through their ward. The closing of the Birthing Center will be a huge loss for the women who have given or would have given birth there, but it will be an even bigger loss for our community.

Care New England ought to take a second look at the Birthing Center's significant contributions to women's health and its pioneering role in the medical community. I hope that the Rhode Island Department of Health will urge them in that direction.

Sincerely,



Laura Healy

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 11:50 AM  
**To:** Hilary Jones  
**Subject:** RE: Please keep Memorial Hospital's Birthing Center open!

Thank you for your comment, Ms. Jones.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Hilary Jones [REDACTED]  
**Sent:** Friday, March 18, 2016 10:49 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Please keep Memorial Hospital's Birthing Center open!

Dear Dr. Alexander-Scott and RI Department of Health,

In January of 2014, after the Affordable Care Act went into affect, my husband and I decided that we would try to get pregnant. We thought this would be a quick process... but lo and behold, after months of trying, using all the tricks in the book, it seemed that it wouldn't be as easy as we'd thought. After a year, and several trips to a reproductive endocrinologist and a "unexplained infertility" diagnosis, we were unsure whether we'd ever be able to get pregnant, and it seemed likely that we'd need to use assisted measures (TUI or IVF) to do so.

After a recommendation from a friend, I started seeing another friend who was an acupuncturist and making major changes to my diet and lifestyle (I was already pretty healthy, exercising regularly and eating a vegetarian diet) to support fertility.

Three months (a year and a half and many tears since beginning the process), we found out we were pregnant!

Having spent so much time and so many emotions to get pregnant, we wanted to be sure that the birthing process was with a doctor, and a facility, we could trust. Going into the process, we had wanted to work with a midwife and potentially give birth at home, but given our process and financial situation, we weren't sure that was feasible. Our acupuncturist recommended Memorial Hospital as a setting that would support our wishes for our birthing process, and we are so glad that she did.

We started working with Dr. Magee, who was so consistently positive and supportive as we went along the way. She took our wants, needs, and philosophy into consideration in all decisions. She provided us with options and education to allow us to make informed decisions. We felt totally comfortable and at ease knowing she was at the helm of the process.

At week 38, I had some peculiar symptoms that led me to receive testing, determining that I had intrahepatic cholestasis of pregnancy (ICP), found in only about 1 in 1000 pregnancies, which can result in stillbirth. After receiving the results, Dr. Magee called me and told me we needed to induce in a few hours.

Induction had not been in our plans (since it was my first pregnancy, I'd assumed the baby would be late, if anything) and we were a bit shaken about the potential danger of the diagnosis. We arrived at the hospital and Dr. Magee met us, and her warmth and knowledge, and the support of the nurses and other doctors, ensured that we were in good hands.

Despite the fact that I was hoping for a natural birth, as the induction process went on over the next two days, we ended up having to have several interventions (foley catheter, pitocin, water broken, epidural, and eventually a vacuum as the baby's heartbeat slowed dramatically between contractions-- we found out that his umbilical cord was wrapped around his neck, not once, but twice). But knowing that Dr. Magee and the Birthing Center support natural birth, we could trust that these interventions were being used because they were totally necessary.

After our son, Tully, was born, we had amazing support from the nurses in the unit, whose experience helped us learn the ropes of early parenthood. They were especially helpful teachers around breastfeeding. And when I had some issues with it when I returned home (there were tears), Michael Fink, the unit's lactation consultant, saw me almost immediately and gave me the information and confidence I needed to get through the first few weeks.

The patient-centered nature of the Birthing Center and their support for natural childbirth created a very unique and positive birth experience for us. Based on information from friends who have given birth elsewhere in the state, we do not believe that we would have had this opportunity and support anywhere else in the state. Given the long process that we went through, it was so important to have access to a doctor, staff, and facility that we trusted.

We are so thankful for this opportunity, and are heartbroken to think that other families might not have this chance in the future. We are heartbroken to think of the families who, unlike us, do not have access to reliable transportation to easily attend appointments outside of their neighborhood/city. We are heartbroken to think that the talented and caring staff of the hospital would potentially end up jobless and the culture they've created would dissipate.

We hope that you will consider the needs of the families of Pawtucket, Central Falls, and Rhode Island, as well as the hard-working staff of the Birthing Center. Rhode Island is a small state, but we all deserve the best that it can provide-- and Memorial's Birthing Center is it.

Thank you,

Hilary Jones



## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 11:49 AM  
**To:** Christine Khaikin  
**Subject:** RE: Comments on the proposed closing of Obstetrical Care at Memorial Hospital

Thank you for your comment, Ms. Khaikin.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Christine Khaikin [REDACTED]  
**Sent:** Friday, March 18, 2016 10:21 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Comments on the proposed closing of Obstetrical Care at Memorial Hospital

Hello,

Attached please find our comments on the reversal of certificate of need for the Obstetrical Services at Memorial Hospital. These comments were presented as testimony by myself at the March 16<sup>th</sup> Public Hearing.

Best,  
Christine Khaikin

Christine Khaikin, JD | Advocacy Coordinator  
MergerWatch Project  
[REDACTED]





## **MergerWatch Project**

Protecting Patients' Rights  
When Hospitals Merge



[www.MergerWatch.org](http://www.MergerWatch.org)

**Testimony of Christine Khaikin, Advocacy Coordinator**  
**Re: Reverse Certificate of need, closure of Memorial Hospital Inpatient Obstetrical Service**  
**March 16, 2015**

Dr. Alexander Scott and other members of the Department of health, my name is Christine Khaikin and I am the Advocacy Coordinator at MergerWatch, a national non-profit organization working to protect patients' rights and access to health care when hospitals consolidate. We thank the Department for this opportunity to speak on the potential closure of the Memorial Hospital Inpatient Obstetrical Services. The ability for affected members of the community and concerned outsiders like me to voice their concerns about the loss of their health care services is paramount to achieving health equity, and we thank you for acting so quickly to hold these hearings.

MergerWatch has an 18-year history working with state and local advocates to protect access to care during hospital mergers in 38 states. Because of this, we have a national perspective on the changing health care landscape. We recognize that hospitals are consolidating at a rapid pace, encouraged by the Affordable Care Act and a push for more coordinated care. A big part of this consolidation is driven by the "triple aim" which calls for the future of health care to focus on improving the patient experience, improving population health, and reducing costs.

Ensuring women have access to comprehensive pre-natal services as well as the ability to give birth in an environment that meets their needs is so critical to abiding by the triple aim's goal of improving the patient experience. Women in Rhode Island have come to rely on the high quality, mother-centered services available at Memorial Hospital, and Care New England should ensure that this culture of care is not eliminated.

There must be a way forward in this changing health care landscape that does not disadvantage women as they seek care for the most natural of human events. Instead of closing a department that is so vital to the community, the state should implement a system to perform comprehensive health planning to determine the needs of each community and not put the burden of these changes on this one, needy population.

As the Department moves forward on this issue, please consider the voices of all of the families in the surrounding communities and the voices of the nurses, doulas, midwives and physicians that will be impacted by these changes to ensure that the wonderful, high quality, evidence based labor and delivery services at Memorial Hospital are not lost.



**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 10:00 AM  
**To:** Bilgen, Bahar  
**Subject:** RE: Memorial Hospital - Reverse Certificate of Need

Thank you for your comment, Dr. Bilgen.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Bilgen, Bahar [REDACTED]  
**Sent:** Thursday, March 17, 2016 2:49 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital - Reverse Certificate of Need

To: Rhode Island Department of Health, Center for Health Systems Policy and Regulation, 3 Capitol Hill, Providence, RI 02908

I am writing to you to express my concern on the request for the closure of the inpatient obstetrics services at Memorial Hospital, among other services and inpatients units.

The request clearly indicates that most of the population that obtain services have been paid by Medicare/Medicaid up to 45%. It is clear that the underserved population will be affected directly. These are mostly the residents of Pawtucket, Providence and Central Falls. This is a problem of access in underserved populations and will be regarded as punishment of these residents. These populations need an urban and accessible community hospital the most, with reduced transportation time and cost. The closing will also affect the community by increasing unemployment as many of the hospital staff and medical personnel work and live in the community.

The request indicates that Women and Infants Hospital, which is the closest option for obstetrics services, is operating close to its yearly capacity. Birth cannot/should not be scheduled so the numbers are not evenly distributed over time. There has been numerous reported incidents when the L&D rooms were full and Women and Infants could not accomodate women in labor, resulting in long waits and births at the triage floor.

Closing the Birthing Center unit at Memorial Hospital and other inpatient services would have grave negative impact on the underserved populations surrounding the hospital, and eliminate one of the most exceptional birth options for all families in RI and southern MA. I hope you will consider these points in making your decision.

Sincerely yours,

Bahar Bilgen, Ph.D.

Assistant Professor of Orthopaedics (Research)

The Warren Alpert Medical School of Brown University & Rhode Island Hospital

Investigator, Providence VA Medical Center

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 9:59 AM  
**To:** Anthony Raucci  
**Subject:** RE: the proposed closing of the birthing center at Memorial Hospital

Thank you for your comment, Mr. Raucci.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Anthony Raucci [REDACTED]  
**Sent:** Thursday, March 17, 2016 7:49 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** the proposed closing of the birthing center at Memorial Hospital

To Whom it may Concern

I am writing to you to express my concern over the proposed closing of the birthing center at Memorial Hospital. I think that this closing should not take place because the community needs a place like Memorial to provide the special care that has been their trademark over the years... Memorial is a special Hospital that provides a very special and needed birthing center.. The care and special treatment they provide cannot be found anywhere in RI, CT or MA.

So at this time I am asking you as the RI department of Health to serious think of preventing the close of the Birthing Center at Memorial Hospital just because the new owners do not think it is profitable.. let us fight the Corporate mentality of the BOTTOM LINE is the only thing that matters

PEOPLE MATTER ALSO !!!!!!!!!!!!!!!!!!!!!!!

Respectfully Yours

Anthony J Raucci

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 18, 2016 9:58 AM  
**To:** Betsey Biggs  
**Subject:** RE: Please Keep MHRI's Birthing Center Open

Thank you for your comment, Ms. Biggs.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Betsey Biggs [REDACTED]  
Sent: Thursday, March 17, 2016 2:02 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Please Keep MHRI's Birthing Center Open

Dear members of the Rhode Island Department of Health:

I urge you not to close the Birthing Center at Memorial Hospital. I am angry that a health institution would sacrifice women's health for financial interests.

Two years ago, as a single pregnant woman, I moved to the Providence/Pawtucket border from Massachusetts. As someone on the older spectrum of maternity, I was so happy to find such wonderful care at Memorial. Not only for the birth itself, but for the birthing center's focus on providing prenatal care and education for marginalized women (teen moms, etc) as well as much better educated women (most Brown faculty I know had their child at Memorial). The birthing center created a sense of community and a sense of hope for those of us lacking support at home, especially those of us with high-risk pregnancies. I'm still in touch with many of the mothers I met there, as well as several of the doctors and nurses.

MHRI is the only hospital in the state that implements the principles of Mother-Friendly care, as outlined in the Coalition for Improving Maternity Services' Mother-Friendly Childbirth Initiative. MHRI has an unwavering commitment to normal physiologic birth, skilled support for vaginal births after cesarean (VBAC), groundbreaking and now well-established Gentle Cesarean, and consistently respectful and individualized care. Had I given birth at another hospital, it is highly likely that my daughter's birth would have been traumatic — I had a 'gentle cesarean' at Memorial and required additional and unexpected surgery during the procedure. The doctors and other staff at MHRI went out of their way to make my experience a celebratory and gentle one — from giving me initial skin to skin and nursing with my child, to allowing me to wait till 38 weeks to deliver, to inviting me to play my own music in the operating room. I truly felt I had a birth, not a surgery. This is not the case for friends of mine who had cesareans at other area hospitals. \*

The Birthing Center offers families the care we seek and demand: high-quality, compassionate, and evidence-based. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country. That the Birthing Center at MHRI is special can be seen in the fact that it's the choice of most of the privileged and educated families in the area as well as the program most focused on serving immigrants, teen mothers, and incarcerated women.

Sincerely,  
Betsey Biggs

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Artist-in-Residence, Rhode Island School of Design, Digital+Media Fellow, Harvard University Department of Music  
mobile: [REDACTED]  
email: [REDACTED]  
web: [REDACTED]

Sunken Gardens, part of the Caramoor Center for Music and the Arts' Garden of Sonic Delights public sound installation exhibit <http://www.caramoor.org/house-gardens/in-the-garden-of-sonic-delights/>

<http://folkartmuseum.org/exhibitions/when-the-curtain-never-comes-down/>

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 17, 2016 1:21 PM  
**To:** Crear, Jara  
**Subject:** RE:

Thank you for your comment.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Crear, Jara [REDACTED]  
**Sent:** Thursday, March 17, 2016 11:46 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:**

Dear DOH:

I am a current medical student at Brown Medical school, and have have worked at Memorial Hospital, the FCC, and the Birthing Center in the past.

I urge you not to close the Birthing Center at Memorial Hospital. The Birthing Center offers families the care we seek and demand: high-quality, compassionate, and evidence-based. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country.

Kent and Women and Infants hospital are fine institutions but cannot replace Memorial Hospital's birthing center, on which the community depends heavily to provide comprehensive, loving, and evidence-based care.

Additionally, this closure removes the opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help address the national shortage we are currently experiencing?

This closure will cause great harm to both current patients and patients of the future.

Thank you for your consideration and your efforts on this dire matter.

--

Jara Crear  
[REDACTED]

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 2:15 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** Emailing: [REDACTED]

March 15, 2016

Dear Paula,

I urge the Department of Health to call on Care New England to keep the Birthing Center at Memorial Hospital open. The following is my experience of the events leading up to, and the VBAC birth of my second child in 2014, attended by Dr. John Morton, at Memorial's Birthing Center.

From the moment I had a non emergent, yet traumatic, c-section with my first child in 2009, I knew that if I ever gave birth again, I wanted a VBAC. For 4 years, I researched and prepared, mind and body. When I became pregnant with my 2nd child in 2013, my research would become a reality, and it was time to find a provider and place to give birth who would be supportive of my endeavor. Living in Westerly, RI, I settled for a midwife in a group of OB's in my town and would plan to give birth at Lawrence & Memorial Hospital in New London, CT. During the 5th month of my pregnancy, it became painfully obvious to my husband and I that though my midwife was open to me having a VBAC, it was very unlikely that she would in fact be present during my labor and birth. Her partners and other OB's at L&M were not VBAC friendly, and during a tour of the hospital, I was told by the tour nurse that VBAC wishes (and the wishes of laboring mothers in general), as a rule, were sadly not followed, and the mother was at the mercy of the OB's demands for induction and birthing positions - to name a few. Bluntly, options were sorely limited. Given L&M's rate of VBAC failure, she was not confident I would be successful and urged me to open my search for another provider and hospital. But unfortunately, she said, "that is the way birthing is in a hospital." I refused to believe her.

During my 5th month of pregnancy, I interviewed 4 additional doctors and 4 hospitals within a 60 mile radius of my home. It was not until Dr. John Morton of Memorial Hospital that my husband and I felt confident that my birthing wishes would be met. Dr. Morton assured me that he would be present for the labor and birth of my baby, not a random OB whom I had never met, who had a different agenda. Dr. Morton was confident in my quest and believed in and trusted my instincts and wishes for my non medicated VBAC plan. During my pregnancy, he was thorough, presenting me with questions every other doctor had failed to ask. For example, how long I would be willing to go over my due date. This may seem insignificant, yet his purpose was to really get me thinking about the "what-if's" before I was at full term, when tensions are high and time can be of the essence. He encouraged me to be in charge of my decisions and healthcare. Seeing his investment in the well being of my mind and comfort level with every possible outcome, I trusted him. I truly felt like we were a birthing team.

When my water broke at 38 weeks, the general protocol at every other hospital is to induce within 24 hours, if not immediately, for the "safety of the baby." Dr. Morton did not rush me into an unwanted induction. My water was broken for 75 hours before my active labor began. This allowance is not to be taken as negligence. I was in constant contact with Dr. Morton and visited the birthing center every day to have myself and my baby monitored and to see where my body was at in the labor process. I was then given the option to go home, be comfortable and progress on my own, an option I gladly

chose. My husband was with me at home every minute to ensure that I was safe, my temperature did not rise, etc.

When my labor was active and I was admitted in the birthing center, nurses gladly and respectfully accepted my birthing plan. When the new shift of nurses came on, they introduced themselves to me quietly and said they understood that I wanted the atmosphere of a home birth, so they were going to do their best to be invisible and allow me, my husband and my doula the space I wanted. Throughout the entire labor, pushing and birth of my baby and placenta, my wishes were met. Lights stayed extremely dim, voices calm and quiet, and the wireless and waterproof telemetry allowed me to move freely around the room and be in the tub for pain management.

Dr. Morton was just as present as my husband and doula were, staying in the room to labor with and support me. My doula took pictures of Dr. Morton supporting me through contractions, kneeling in front of me to help keep my focus, and even holding my popsicle when I had to grip onto something with both hands during a contraction. My cervix was not checked unnecessarily or often, only twice to see if I was dilated enough to push. During the pushing phase, which lasted about an hour with mother directed pushing, Dr. Morton used a flashlight so the lights could still be dimmed and a hand mirror as to not ask me to move into a position that was optimal for him to assist yet uncomfortable for me. He stayed for about an hour after the birth, stitching my 2nd degree tear and congratulating me on a job well done, affirming the fact that it was "all me" who did it. My quest for a non-medicated VBAC had become my reality. My doula, who had attended over 115 births at surrounding hospitals (this was her first time at Memorial), was in awe of the choices and attention I was given, as well as the absence of pushing of interventions by my doctor to speed things up. She had never seen anything like it in a hospital setting.

The nurses, during my 2 day rest and recovery, were stellar and kind. They would come in my room and after they did what they came in to do, would often sit and talk with my husband and I about the VBAC, our older son, or breastfeeding. The day I was to go home, Dr. Morton came to visit, sitting and talking with my husband and I for over an hour. We talked of and reminisced about my successful VBAC and the choices we made. All very friendly and comforting.

The story I tell, my VBAC experience, is not specific to me. I have read countless birth stories of women who have birthed at Memorial and have had the same excellent, hands on, natural based care as I. Though there may be some, I have not heard of a negative birth story at Memorial. The majority of women who go into Memorial's Birthing Center are seeking a natural birthing experience. The mothers who come out of Memorial are empowered, feeling they made the right decision to birth there. Though my story focuses on Dr. Morton, I have heard that ALL the doctors and nurses at Memorial care for birthing women and their families the same way. From what I understand, the gentle cesarean they offer is as natural and family friendly as possible, allowing immediate skin to skin and not separating mother and baby. Doulas are also allowed in the operating room. During my c-section in 2009, I saw my baby for about 1 minute from afar before he was taken into another room with a nurse I had never met (my husband went with them) as I was left alone, scared and in shock, to be stitched up for 45 minutes. I did not hold or see my baby until about an hour and a half after he was born.

The natural birthing culture, evidence based care, and providers at Memorial Hospital are simply unmatched. It is a small intimate hospital, able to truly be one on one with patients. At Memorial, a laboring woman is brought immediately up to the birthing center, whereas at large city hospitals, they are bound to wait in the ER and go through triage. A lengthy, painful and impersonal process for a laboring mother. What Memorial does for women and their families is sadly not offered or allowed in other hospitals in our area. A Westerly resident, I drove 60 minutes one way, and my husband and I



drove it each time with confidence. Though I can never be certain, we feel if I had birthed anywhere else, my pregnancy would have once again ended in a c-section.

One need not look far to realize that non medicated natural-based maternity care in our country is in trouble, emphasizing unneeded interventions as well as diminishing and taking away women's choices and rights - by simply stating that her requests are "against hospital policy". This is one of the reasonings for the increase of home births - because women are simply not willing to compromise and ignore their intuition. For the sake of bringing babies into our world in a natural, safe, evidence based and loving environment, I urge the Department of Health to call on Care New England to keep Memorial's Birthing Center open. To close it would be a major step backwards in healthcare and leave a gaping hole for natural birth in our area.

Thank you for your consideration and efforts.

Sincerely,  
Kate Schackner

A large black rectangular redaction box covering the signature area.

organizations should have been consulted in order to determine the impact of possible closure. <sup>explore possible solutions</sup> Not insignificantly, a careful plan should have been developed that would protect the patients currently in the system.

[request 30 sec]

Instead, the local community <sup>risks</sup> ~~is being put at future health risk~~ <sup>loss of essential access to healthcare</sup>, families from throughout the state <sup>are</sup> ~~are~~ losing a vital, evidence-based maternity model, and the families currently under the care of Memorial doctors have been shown a callous disregard through CNE's actions, actions that have and continue to put them under an amount of psychological and emotional stress that leaves me speechless.

Please understand that the Coalition continues to strongly believe, in spite of statements suggesting otherwise in <sup>CNE's</sup> ~~the~~ 3/14 response to the health department's requests for more information on 3/9, that plans for privileges for a number of the practitioners at memorial have not been formulated, and thus that no plan for continuity of care for their patients exists.

This and the reality that many families continue to receive confusing and contradictory information about where and with whom they will deliver shows a grave disregard and disrespect for mother's and babies' psychological and physical health – the health that Care New England is entrusted to protect.

I personally, and we, on behalf of the Coalition, request that you consider all these factors carefully in your decision, and that in reaching your decision, you ensure that families currently under the care of Memorial doctors are not further harmed or neglected.

As a Coalition, we will continue to work within the community to bring the voices of families forward. We welcome partnership with the state, with CNE, and with any system providing maternity care, so that together we can work to offer all families what they so deeply deserve: physical and psychological safety, health, respect and genuine compassion.

My name is Susie Finnerty. I am a mother of two, expecting my third baby and a professional birth doula in this community. I just want to thank you for listening today. The impact of your decision on this matter will be profound.

I became pregnant with our second child shortly after moving to Rhode Island in 2013. After research and consulting with providers around town, I specifically chose a midwife who delivered at Memorial Hospital due to their reputation of evidence based care.

At 19 weeks it was discovered in an ultrasound that we were having a daughter and that she suffered from an incurable neurological disease. The physician who performed the scan informed us that if she lived, she would be severely disabled. My provider, who was informed immediately on a Saturday afternoon, spoke to us with such compassion and truly mourned with us. Instead of passing my care to another practice, my support tripled.

That Monday I reached out to W&I Maternal Fetal Medicine clinic for a second opinion on the diagnosis. I was told by reception that I "was not allowed to continue seeing my provider." I was able to be transferred on the phone to an OB briefly who said the same thing and told me "there was no point in researching options for delivery or treatments for my baby. It would not change my or her outcome and there was no point." He said my provider should have already "dropped me" and sent me there. That phone call was the end of my relationship with W&I.

I won't get into the total chaos that followed getting consultations from 11 different doctors, finding a brain surgeon for my daughter, fetal MRI's and about 17 different conflicting opinions. Through all of that my midwife was steadfast, organized and helped advocate to get me those appointments.

At 36 weeks pregnant, I woke up on a Saturday morning, and having been treated for bronchitis earlier that week, it had worsened. I was having difficulty breathing and pain in my chest. I could hardly call my provider, but she picked up and told me to meet her at Memorial. I walked straight into labor & delivery. No triage, no ER, no explaining the long story to seven people before I could see her. She was waiting for me at the nurses station and showed me to a room. She had ordered and waiting a breathing treatment, took my vitals and sat there with me while I was getting the treatment. At this point I hadn't decided if I would deliver at Memorial, or up in Boston near our chosen pediatric neurosurgeon. She listened, affirmed what did and didn't make sense, and spoke from experience. Nurses came in to offer me food and drink, they called my baby by name

and said she was beautiful. It was there I made my plan for delivery and how I wanted my daughter to be cared for. I could breath again.

After deciding we would deliver in Boston, Memorial's team agreed to be my back-up, they would find a ambulance company who would transfer my daughter to Boston if needed. I was given access to their OBs for opinions, the director of Obstetrics there. I was treated as if this was the most important matter of my life.

I have supported women as a doula all around this state and Massachusetts with a variety of complications. The care I received at Memorial is standard there. No other hospital, especially Women & Infants, has that level of cultural competency and continuity of care.

Regarding my current pregnancy. I am angry with the wording used to describe this closure as a transfer of care. Because of the nature of the incision made on my uterus to save my daughter's life, my VBAC is not supported by Women & Infants or Kent Hospital. This is not based on evidence. They do <sup>not</sup> rely on the judgment of my provider, whom I would like to follow. This is an out of date hospital policy. I consider mandatory surgery torture. And that is what Care New England is asking of me by eliminating this option. They have not allotted ample time even evaluate these consequences. We are shedding light on this issue with our letters, petitions, and testimonies.

My much longer letter explains my opinions on their reason for closing this unit due to finances, which I won't get into here because of time, but there are other ways and solutions that have not been explored.

Dr. Alexander-Scott, you can stop this. You can say no. Thank you.

### **The Process**

Notice of the public hearings in this matter was posted on or about March 8, 2016.

The public, therefore, was given at best seven (7) days advance notice of the first hearing (perhaps less).

We do not believe that that time period is adequate under State law. We have submitted papers arguing that a minimum of thirty (30) days advance notice is required. And we await your decision.

As of the date of the first hearing (March 14<sup>th</sup>), CNE had not submitted a written plan re the closing "in form and content acceptable for review by the department." Those are the Department's words, not mine.

We asked, therefore, that the public hearings be rescheduled for a later date. The Dep't denied our request.

By insisting that the hearings go forward as scheduled, the Dep't necessarily forced the public to comment on a closure plan that did not exist at the time of the hearings (and still does not exist as far as I know).

Consider, for a moment, the disadvantage to the public; the public has one week at best to prepare to comment on a non-existent plan to close the birthing center.

The public comment period cannot possibly be considered legitimate in this context.

Indeed, once the Dep't has determined that the application is complete, the public should be given adequate notice and another opportunity to comment, this time, on the actual closure plan.

### **The HCA/Regulatory Violations**

We have submitted papers arguing that CNE violated State law/regulations by repeatedly announcing the closing of the birthing center, prior to getting the Department's approval to close.

Obviously, the Dep't has yet to render its decision on the closure. That, however, has not/did not keep CNE from telling the staff repeatedly that the birthing center was going to close on a date certain:

- On March 1<sup>st</sup>, prior to Dr. Dacey's grossly inadequate submission of March 2<sup>nd</sup>, CNE informed the staff that the floor would be closed on March 14<sup>th</sup>.
- Two (2) days later, on March 3<sup>rd</sup>, CNE informed the staff that the floor would close on March 17<sup>th</sup>.
- On that very same day, you madam Director issued an order prohibiting CNE from closing the floor prior to getting the Department's approval.
- On March 4<sup>th</sup>, however, CNE, in defiance of your order of the previous day, informed the staff that the floor would close on March 18<sup>th</sup>.

- And in yet another act of defiance, on March 5<sup>th</sup>, CNE informed the staff that the last patient would be admitted on March 16<sup>th</sup>.

Imagine for a moment being a CNE employee during this time? Going home to your family four (4) times in a five (5) day period to tell your family that you're gonna lose your job.

Imagine for a moment being a provider during this time? What are you supposed to say to your patients? You're gonna deliver at the birthing center; you're not going to deliver at the birthing center?

And imagine for a moment being a patient during this time? Not knowing where you're going to go for your care at arguably the most important point of impact in your life.

What kind of organization conducts itself in this fashion?

CNE has turned real people's lives upside down here. They have been nothing short of cold and callous, irresponsible, perhaps negligent.

They have to be held accountable to this community.

And we await your decision as to whether or not there will be consequences for the violations of the HCA.

#### **The Violations of Dr. Fine's Decision w/ Conditions of June 26, 2013**

I quote from p. 18 of the Decision: "no elimination of clinical services is envisioned" "during the first three years after the formation of the new hospital."

I quote from p. 64 of the Decision that speaks to a balanced health care delivery system "as one that provides an optimal mix of primary care [ ] services within a defined geographical area. Such a system would enable patients to receive care in their own communities."

I quote again from p. 18 of the Decision: "CNE will finance MH operational shortfalls through September 30, 2016."

I quote from p. 69 of the Decision: "the conditions set forth above shall be enforceable and have the same force and effect as if imposed as a condition of licensure."

CNE's request to close the birthing center "at the earliest opportunity" in the words of Dr. Dacey, represents a gross violation of each and every one of these conditions and cannot be permitted.

We await your decision on this issue and expect you to enforce these conditions.

#### **Summary**

The community should be given at least thirty (30) days advance notice to comment on CNE's plan to close the birthing center (not a week).

That minimum thirty (30) day notice period should run from the date on which the Dep't determines that the application submitted by CNE is complete (no sooner).

\*The Dep't should schedule a hearing on an expedited basis to get at the issue of CNE's violations of the HCA, and the corresponding regulations. If you don't madam Director, nobody will.

\*The Dep't should schedule a hearing on an expedited basis to get at the issue of CNE's violations of the Director's 2013 Decision w/ Conditions approving the affiliation of MHRI w/ CNE. If you don't madam Director, nobody will.

Indeed, the Dep't should slow this whole process down so as to prevent CNE from going forward with its botched plan to close the birthing center.

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Hello,

My name is Kaeli Sutton and I am here to testify as a spokesperson for the Coalition to Save Memorial Birthing Center. I am here, also, as a long-time advocate for families in Rhode Island, and as provider of holistic wellness services specifically focused on supporting the physical and psychological health of expecting and new families.

In more than 11 years working in this community, I have supported and closely observed the experience of thousands of families – both in my work outside hospitals, and, while supporting families in birth, from within many of our (and other) state's institutions.

The families I have worked with include individuals from our most underserved populations as well as our most privileged -- the mother in prison, preparing to give birth and be separated from her baby, the mother living on her friend's couch and fighting her way through public assistance applications, the Brown PhD, and the physician, each preparing in her own way to bring her baby into the world.

In very important ways, the experience of these women and families is vastly different. As any of us in medicine, public health or advocacy knows -- the cards stacked either for or against them will be significant determinants of their future physical, psychological and social health.

But in this moment I want to draw our attention to the ways in which these families are the same. Each of these women, these babies, these families share the most basic human instincts and experience – the desire to be safe, the desire to be healthy, and the desire to <sup>be</sup> treated with respect and genuine compassion.

They count on their medical teams, medical institutions and government to hold in sacred trust a commitment to just those things: access to skilled medical care the protection of ~~physical and psychological~~ health, and the delivery of these with a level of respect that acknowledges the humanity and genuine importance of each mother, each family member, and each new ~~precious~~ baby.

Over the course of these hearings community members and perinatal professionals have discussed the essential importance of the Birthing Center at Memorial Hospital to the local community and to our statewide maternity care systems. They have strongly cast doubt on CNE's position that local, underserved populations will be able to access care at Kent or WIH, and they have pushed back against the financial arguments – noting that as is true for the myriad of struggling hospital systems in this country, this is an issue of careful allocation of funds and restructuring – restructuring, I will add, that should protect the vital <sup>organs</sup> ~~organs~~ within the entire system. — *Memorial Hospital is one of those vital <sup>organs</sup> ~~organs~~ —*

*the birthing center certainly not*  
Memorial hospital <sup>are</sup> is not the cancer within the CNE system – mismanagement is. If the financial situation has been so dire, these issues needed <sup>should have been</sup> ~~to be~~ addressed long ago, ~~and~~ <sup>in</sup> this process members of the community and community advocacy

→ people not here

WIH piece

the most technological birth is not the safest birth



## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 17, 2016 11:09 AM  
**To:** Sara W.  
**Subject:** RE: The restructuring of Memorial Hospital in Pawtucket,RI

Thank you for your comment, Ms. Wenzel.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Sara W. [REDACTED]  
**Sent:** Thursday, March 17, 2016 10:46 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** RE: The restructuring of Memorial Hospital in Pawtucket,RI

Hello!

Thank you for taking time out of your busy day to read this email, the community of RI is extremely grateful for your consideration.

I am sure you have hundreds of emails and letters to go over, so i will try to keep this fairly short.

As you are aware, Care New England(CNE) has proposed a restructuring and relative dismantling of Pawtucket Memorial Hospital. There are so very many reasons why this is an awful move to make, for everyone involved. Some reasons I'm sure you have read/heard over and over again are; some of the most poverty-stricken communities are served by Memorial, lack of public transit to other area hospitals, and the care at Memorial cannot be matched at any other local hospital. All of these reasons are extremely valid and are worth The Department of Health's most earnest consideration. In addition to the above stated reasons, i would like to provide a few of my own that may not have been brought up or considered as of yet.

It has been brought up how deeply this closure/restructuring would effect the specific communities of Central Falls,Pawtucket and Johnston. But i would also like to bring to light that it would effect far more communities than these. It would effect the whole state. It would greatly impact \*all\* of the poverty-stricken communities.Rhode island is a small state,but still has a fairly large population. Other area hospitals are already over crowded and fairly under staffed. Other area birthing units already have trouble keeping up with the influx of birthing mothers and more often than not cannot provide rooms for women to labor and birth in. This being the case, adding even more patients to an already over-taxed hospital system would lead to a truly awful health crisis. The rate of practitioner mistakes and malpractice would sky rocket, the ratings of hospitals in our area would plummet and in turn the department of health would be swamped with complaints and problems in regards to these issues.

I am from Woonsocket, and while i am slightly above the poverty line, myself, the majority of the families in my community are not. My neighbors and friends struggle with transportation, they struggle to provide food for their families and there are very few available jobs in my town. The only hospital in our town has a severely bad reputation for not being to care for their patients(due to the lack of staff and funding/resources) and is overrun with problems. If Memorial was to close its birthing unit and severely limit its other services, everyone in Rhode Island would be negatively affected. . . .especially the states most at-risk families. Memorial cares for those who have fallen through the cracks at other area hospitals. They provide services to some of our states most needy people. And they do this without judgement and with the respect that all humans deserve, regardless of their current situation or socioeconomic status. Please do not allow CNE to close this hospital that is so vital to the heartbeat of our beautiful little state.

Thank you so much for your time and consideration,

Sara R Wenzel

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 17, 2016 9:51 AM  
**To:** Sam IsHome  
**Subject:** RE: Re closing of birthing center

Thank you for your comment, Ms. Doak.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Sam IsHome [REDACTED]  
**Sent:** Wednesday, March 16, 2016 10:00 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Re closing of birthing center

Dear Ms. Pullano,

I am so discouraged to see that you all are considering closing the Birthing Center at Memorial Hospital.

When I was a young (27) mother, I was subjected to a ceserean section, due in large part to "provider exhaustion." I was young and healthy, and my baby was just fine. My practitioner, however, grew tired of my lengthy labor and next thing I knew, I was in surgery. A healthy baby boy, but my pelvis was declared "too small for a vaginal birth."

I was fortunate to move to Chicago with my next two babies. I employed the service of HomeFirst, a physician-assisted home-birth practice. With the support of my doc (at my house) and two lovely doulas/midwives, I birthed my next two babies at home - no drugs, considerably larger, and again, healthy babies. I was a low-risk mother, still relatively young (32/35), and the support I had with the practice made the difference between a surgical, and a normal, birthing experience.

With my fourth child, our family had moved to a back-water town in Appalachia. No VBACs allowed (despite having already "proven" my pelvis), and considerable pressure to operate early, due to the large size of my offspring. The ceserean rate at my local hospitals is over 35%.

With no real options, I decided to birth my daughter at home with no attendants. I really had no options at that point - go to the hospital and have a forced ceserean, or what else?

A birthing center gives low-risk mothers a safe and healthy option for birth. They do not have to choose a radical decision, based on fear. They can have the support of women who understand and trust birth. Or, they can go to the hospital where the ceserean rates are climbing.

Please reconsider the closing of this institution. Women deserve safe choices, and a natural birth is truly the safest option out there.

Heather Doak  
Parkersburg WV

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## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 17, 2016 9:50 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital in Rhode Island  
**Attachments:** 12106941\_901736823228317\_5047400010946854085\_n.jpg

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Travis, Nancy [REDACTED]  
Sent: Wednesday, March 16, 2016 9:32 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Memorial Hospital in Rhode Island

To whom it may concern:

You think that a hospital pretty far away from Southwest Florida would not impact anyone here, and you may be right. However, in 2012, the birthing center director of this little hospital in Rhode Island shared with me the information about the Gentle Cesarean at their hospital and it helped to put into motion the Gentle Cesarean at my hospital. fNow the women of SW Florida get to have their babies with them immediately after birth even if they are having a cesarean birth. Yes, it started in RI, moved to Cape Coral and now is pretty standard in our area. In fact, a few years ago, we were the first hospital in the United States that was able to put triplets skin to skin in the Operating Room. I have attached a picture so you can see what this means to women. The Memorial Hospital obstetrical unit has been able to take "mother-friendly" care practices to the next level by implementing practices such as the Gentle Cesarean and their volunteer doula program.

Do not close a great hospital simply because it is small! The United States needs community hospitals who truly care about evidence based practice and do the right things for mothers and newborns. Rhode Island needs this too! These units are frequently best practice models for the rest of the country.

Thank you for listening to the comments from the public around this hospital and from far away who know how special Memorial Hospital really is!

Nancy J. Travis, MS, BSN, RN,BC, CPN, CBC, DFB Director Women's Care ~ Birth Suites Lee Memorial Health System Cape

[REDACTED]

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 22, 2016 10:17 AM  
**To:** Ashley Lakin  
**Cc:** Shelov, Elizabeth (OHHS)  
**Subject:** RE: For the record, in regards to Memorial Hospital

Thank you for your comment, Dr. Lakin.

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**From:** Ashley Lakin [REDACTED]  
**Sent:** Monday, March 21, 2016 5:17 PM  
**To:** Pullano, Paula (DOH)  
**Subject:** For the record, in regards to Memorial Hospital

Hi Paula,

Please receive my official comment on CNE's proposed reversal of CON for maternity services at MHRI. I was unable to attend the session, as I was in a delivery, and part of this was presented on my behalf, but I wanted the full letter to be on the record.

Thank you,

Dr. Ashley Lakin [REDACTED]

I have tried to sit down and write this several times. And yet...The words get stuck between my mind and fingertips. I am a physician after all (a mother before all). Years ago I sacrificed my ability to efficiently construct a half-decent paragraph at the altar of the study of human anatomy. Highly valued writing in medicine is highly scripted, minimalist, and largely stripped of subjectivity (though thinly veiled as objectivity). Sentence composition is time wasted. Written words in medicine are not used to pay homage to the experience, to confess the doubt or clinical murkiness. The best notes are brief, clear, precise, and make no room for uncertainty or emotion. This is not a clinical document.

So permit me to be precise. I am not writing as someone's employee, a physician, a graduate student, or a representative of a contingency. Rather, I am all of these, and as well as believer in women and their power, a woman and a mother. I am writing as a human, reaching out to other humans in this quirky, loveable, and highly dysfunctional state where we live and grow our families.

I birth at Memorial because I am Memorial. That labor unit mirrors and reflects back to me my values as a human, as a woman, as a clinician, an advocate for families, and now as a mother. The experiences that I have had there span the breadth of the human experience, the triumphs and elation of birth, the profound and consuming sadness at the death of a child. To shut it down, is to shut me down. It is to sweep under the rug those families, those hours, those moments of sheer panic, of profound pain, of light and healing, of redemption, of miracle, of the creation of family- mine included.

I birth at Memorial because I know I am safe there. Safe from non-indicated and harmful intervention, safe to trust in my inherent ability to birth, safe to follow the suggestions of my care team and knowledge and skill of my physician, safe to open myself up to the vulnerability that is birthing and becomes breastfeeding and motherhood.

I birth at Memorial because I have seen the incredible teamwork of those nurses and physicians in action, and I know that there is not better care available in an emergency.

I birth at Memorial because the care that happens there is intentional, because the woman and child are at the center of it all, and I can trust that recommendations and standards of care were created with me and my baby in mind, and well-ground in evidence.

I birth at Memorial because that small, sacred birthing center and those who keep it going, who choose to invest their time in its fading facade, do so because they love, and trust, and respect the work of birth and the women who do it. Attending to women as they birth is a privilege that I hope to never take for granted. The culture of the Birthing Center is one of collaboration, of joy, of service, and of gratitude. Who would not want to bring a baby into the world in this environment? It represents the best that health care has to offer: service, humility, collaboration, evidence, skill and love.

I am glad that the Department of Health has created a forum in which we can all hear of these stories, most of them love stories. But there are stories missing. There are women and families unable to attend these hearings. There are stories of loss and of heartbreak. It is with these stories in mind that I request a scrutinization of the recent usage of the term "safety." There is not now, nor has there been, evidence in the medical literature to suggest that a certain number of births per year guarantees that an institution is able to ensure safety in childbirth, nor even that the hospital setting provides optimal safety for all mothers and their infants. Those of us who do this work know, if we do it long enough, that we will be brought to our knees by the limitations of our training, our knowledge. A life will slip through our hands. And when this happens, and as we pick the pieces of ourselves up and try and reconstruct a better version, as we mourn, and drill, and question, and rehash the story of that loss, the truth about the birth of that child is only his mother's to tell. It is her story. Let us not dare to undermine the knowledge and autonomy and confidence of the families who have chosen to birth in their community by throwing that language around recklessly. We can always do better. We can ALL do better. We owe it to the women and families we have the privilege of serving.

There are also stories of redemption, of skill, of teamwork, and of flawless execution. Of everything going right. These too are missing, as their tellers are the women of Central Falls and Pawtucket whom, for myriad reasons, are unable to be here, or unaware of their option to do so. When all obstetrical care is transitioned down the road, that 6.8 miles may matter: for the women who come in to the Emergency Department seizing with eclampsia, bleeding with a placental abruption, with the footling breech ready to be born, for those with the need for daily monitoring of their high risk pregnancies and no access to a vehicle. May the Department of Health please consider the ways in which we can guarantee their access to high-quality care, and improve upon it. More than a few times per year, these scenarios aren't scenarios at all, but the stories of real families.

If this is an economic problem, then let us find an economic solution, one that doesn't come at the cost of relocating the care of some of the state's most vulnerable families (who happen to birth in the room next to some of its most privileged). One that isn't acted out upon women's bodies, one that does not restrict our choices. But this is not about who births at Memorial, it is about the preservation of their right to have a say in the matter. Let the finance masterminds try harder. Let them be innovative and put their MBAs to use. I do not expect them to solve problems that arise in my exam room, and the stories of my patients and their families do not belong in their Boardroom. This is not specific to Memorial, of course, it is about health systems more broadly. And even the largest systems are made of people, and people belong to families. Birth matters for everyone.

When the stories of our lives, our births, our families, our losses, are reduced to numbers on a spreadsheet, something is lost. We are all lost.

Ashley M. Lakin DO





## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:33 AM  
**To:** Molly Miner  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** RE: Memorial Hospital

Thank you for your comment, Ms. Miner.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Molly Miner [REDACTED]  
**Sent:** Saturday, March 19, 2016 11:20 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Memorial Hospital

I understand that there are many proposed changes at Memorial, but my comments are strictly regarding the birthing center.

I did not birth there, nor was I born there. I'm concerned with the closing of the birthing center for two reasons. First, the surrounding communities need easy access to maternity care. It's hard enough being poor, and the poor ironically pay higher prices for basic necessities as it is. The Affordable Care Act and Medicaid cannot help people who cannot reach services.

Secondly, there should be choices available. I speak from a perspective many people do not hear from. Both of my children were born while I was on active duty in the U.S. Navy. I had no choice in how my children were born. The wives of active duty members were often allowed to choose who delivered them and where. But military people are government property and we do as we're told, and was expected to use military medicine. My eldest child is 24 years old and it breaks my heart that his birth was one of the most traumatic and depressing events in my life. It was awful physically (induced for no medical reason, prolonged labor, c-section, massive blood loss, back to work six weeks later), as well as emotionally (no family to help other than baby's father, few friends since I was relatively new to the command).

I know what it feels like to have no choice. I honestly believe that medical interference created 90% of the trouble I had delivering my baby. I would have loved to have been provided a doula and a natural birthing experience. Are medical interventions necessary? Sometimes. But women's bodies are largely made for birth, and many problems simply lie in the fact that the places where women birth often do not have the inclination to wait for this natural process. It's hurry-hurry-hurry and let's get this kid out before shift change. That's not how life should begin.

Let's place a bit more value on the needs of the population and less on the needs of the CEO's purse.

Molly Miner, RDMS

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:37 AM  
**To:** Karen Votava; noreply@list.moveon.org  
**Cc:** Danika Hubbard  
**Subject:** RE: Importance of preserving unique birthing center at Memorial Hospital

Thank you for your comment, Ms. Votava.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Karen Votava [REDACTED]  
Sent: Sunday, March 20, 2016 12:14 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>; noreply@list.moveon.org  
Cc: Danika Hubbard <danikavotava@mac.com>  
Subject: Importance of preserving unique birthing center at Memorial Hospital

I am the grandmother of a baby boy born a month ago at Memorial Hospital's birthing center- Tristan Charles Hubbard. I am very concerned about the proposed closing of the birthing center, first because it will deprive local residents of a needed facility, most importantly those who don't have access to a car and must use public transportation. The alternate birthing options will place a severe burden on the many lower income residents of the local area.

But, I am most concerned about the loss of the unique services which Memorial Hospital offers its obstetric patients. My daughter, who lives at the opposite end of the state, worked hard to find the doctor and center that would allow her to pursue having her third child vaginally, despite having had an emergency C-section for her second baby. Dr. Morton, who performed the delivery and coached her prior to the birth, proved to be all that she had hoped for and more. From what I learned, he assumed a deliberate approach during the delivery period, not rushing things along, to allow it to proceed naturally – and it did! I believe that none of the other hospitals in the State, including the two other Care New England hospitals, would have encouraged this patient-centered approach to the delivery.

And so, on behalf of the many other Rhode Island mothers who will seek such care and delivery in the future, I plead that you NOT CLOSE MEMORIAL HOSPITAL'S UNIQUE BIRTHING CENTER AND ENSURE THAT THIS KIND OF BIRTHING MANANAGEMENT BE PART OF THE CHOICE SYSTEM FOR ALL OF RHODE ISLAND'S MOTHERS IN THE FUTURE.

Sincerely,  
Karen Votava  
[REDACTED]

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:37 AM  
**To:** Elaine  
**Subject:** RE: Closure of Memorial Hospital Birthing Center

Thank you for your comment, Ms. Levin.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Elaine [REDACTED]  
**Sent:** Sunday, March 20, 2016 4:29 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Closure of Memorial Hospital Birthing Center

Dear Dr. Alexander- Scott,

I am writing to vehemently oppose the closing of Memorial Hospital's Birthing center. Memorial Hospital has been a part of the Pawtucket Community for more than 100 years, and as such has served this community as a major source of quality accessible health care. I was born at Memorial Hospital and many members of my family have used this facility over the years. The population of Pawtucket and Central Falls contains many individuals that are at or below the poverty level. Memorial Hospital has never turned anyone away based on their ability to pay nor have they given less than the best care possible for each and every patient. The Birthing Center serves many very young first time mothers who have the chance to experience the wonderful patient driven delivery experience with caring physicians, nurses and doulas that Memorial provides. Care New England says that these patients can simply come to one of their other facilities, Women and Infants in Providence or Kent Hospital in Warwick, but neither of these facilities is an easy commute if you depend on public transportation. Care New England also stated that the Birthing Center closure was only one part of the services they intend to eliminate at Memorial Hospital. Their plan also includes eliminating the ICU, all but one Medical Surgical floor and consolidation of the Laboratory. The ER will remain open but who would come here certainly no one who might be experiencing a heart attack, stroke or other life threatening illness if there is no ICU for them to be admitted to. I hope these patients will be able to survive long enough to get to the appropriate care facility in Providence. I hope you will take into consideration not only how important Memorial Hospital is to the community of Pawtucket and Central Falls but also how divisive Care New England has been in their plan to obtain Memorial

Hospital and take only what they wanted from it, never having any intention of keeping it a full service Community Hospital as promised in the affiliation agreement. They only wanted the Family Care Practice and the ability to move the Brown Medical School Residency Program in Internal Medicine to Kent Hospital. We are all aware that Memorial was struggling financially when Care New England took over, but last year they claimed to have reduced our deficit now suddenly this fiscal year Memorial is losing 3 times the money it was and Care New England has tied all of its losses to this Hospital. If Memorial Hospital is dragging the Care New England system down, perhaps it is time to sever ties with Memorial and let it go into State Receiver ship, like was done with Landmark Hospital in Woonsocket. This Hospital is still serving as a full service Hospital for people of Woonsocket. Please consider every option possible before you allow Care New England to dismantle this vital and necessary Community Hospital.

Sincerely,

Elaine Levin

Smithfield, RI

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 10:33 AM  
**To:** Elisa Glubok González  
**Subject:** RE: Concerned medical student re: closure of Memorial Hospital

Thank you for your comment, Elisa.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Elisa Glubok González [REDACTED]  
**Sent:** Monday, March 21, 2016 10:15 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Concerned medical student re: closure of Memorial Hospital

Dear DOH:

I am a current medical student at Brown Medical school, and have have worked at Memorial Hospital, the FCC, and the Birthing Center in the past.

I urge you not to close the Birthing Center at Memorial Hospital. The Birthing Center offers families the care we seek and demand: high-quality, compassionate, and evidence-based. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country.

Kent and Women and Infants hospital are fine institutions but cannot replace Memorial Hospital's birthing center, on which the community depends heavily to provide comprehensive, loving, and evidence-based care.

Finally, this closure removes the opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help address the national shortage we are currently experiencing?

This closure will cause great harm to both current patients and patients of the future.

At Brown Medical School, we currently have a subinternship in colorectal surgery (among several others under surgery), but not a single one in family medicine. What does this say about our healthcare priorities as a city?

Thank you for your consideration and your efforts on this dire matter.

Sincerely,  
Elisa Glubok González

--  
Elisa Glubok González  
[REDACTED]

## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 11:22 AM  
**To:** william whiting  
**Subject:** RE: Memorial Hospital Birthing Center Comment

Thank you for your comment, Mr. and Mrs. Whiting.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

**From:** william whiting [REDACTED]  
**Sent:** Monday, March 21, 2016 11:20 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital Birthing Center Comment

Dear Ms. Pullano,

Our daughter was born at Memorial Hospital in December of 2014, and as a result, my wife and I believe that closing Memorial Hospital's Birthing Center is not in the best interest of the community. The Department of Health must not approve this action. Care New England would do better look elsewhere for remedies to their financial challenges.

- A community hospital without a maternity unit is absurd.
- Reducing options for women in need of maternity care provides no qualitative benefit.
- Added travel for families of the surrounding communities increases health risks to mothers and babies as well as increasing logistical challenges for all involved.
- This closure sets a terrible precedent in the sense that access to quality maternity care should not be determined by strictly economic factors. In other words, where will the next closure be? And the one after that?

MHBC provided a wonderful experience for our family. We chose MHBC because of its steadfast commitment to provide the type of birth environment we sought. One encouraging a natural, gentle process not overshadowed by clinical directives but rather focused on the needs and wishes of the mother and child. We are so glad and grateful to have done so. MHBC's model should be emulated not eliminated, its facility safeguarded not shuttered.

We urge you to deny issuance of the Reverse Certificate of Need that would permit the closure of MHBC.

Thank you.

Sincerely,  
William and Ozge Whiting  
[REDACTED]

## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 11:39 AM  
**To:** william whiting  
**Subject:** RE: typo

No worries, Mr. and Mrs. Whiting.

When I read your comment, I thought that the word "to" would was left out in error.

Again, thank you for your comment.

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: william whiting [REDACTED]  
Sent: Monday, March 21, 2016 11:31 AM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: typo

Dear Ms. Pullano,

Our apologies for the typo in our last email to you. The third sentence should read, "Care New England would do better to look elsewhere for remedies to their financial challenges."

Thank you,  
William and Ozge Whiting



## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 17, 2016 9:50 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital in Rhode Island  
**Attachments:** 12106941\_901736823228317\_5047400010946854085\_n.jpg

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Travis, Nancy [REDACTED]  
Sent: Wednesday, March 16, 2016 9:32 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Memorial Hospital in Rhode Island

To whom it may concern:

You think that a hospital pretty far away from Southwest Florida would not impact anyone here, and you may be right. However, in 2012, the birthing center director of this little hospital in Rhode Island shared with me the information about the Gentle Cesarean at their hospital and it helped to put into motion the Gentle Cesarean at my hospital. fNow the women of SW Florida get to have their babies with them immediately after birth even if they are having a cesarean birth. Yes, it started in RI, moved to Cape Coral and now is pretty standard in our area. In fact, a few years ago, we were the first hospital in the United States that was able to put triplets skin to skin in the Operating Room. I have attached a picture so you can see what this means to women. The Memorial Hospital obstetrical unit has been able to take "mother-friendly" care practices to the next level by implementing practices such as the Gentle Cesarean and their volunteer doula program.

Do not close a great hospital simply because it is small! The United States needs community hospitals who truly care about evidence based practice and do the right things for mothers and newborns. Rhode Island needs this too! These units are frequently best practice models for the rest of the country.

Thank you for listening to the comments from the public around this hospital and from far away who know how special Memorial Hospital really is!

Nancy J. Travis, MS, BSN, RN,BC, CPN, CBC, DFB Director Women's Care ~ Birth Suites Lee Memorial Health System Cape

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 15, 2016 10:18 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital changes

Paula Pullano  
Center for Health Systems Policy and Regulation Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

-----Original Message-----

From: Melissa Casto [REDACTED]  
Sent: Monday, March 14, 2016 8:52 PM  
To: Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
Subject: Memorial Hospital changes

I just want to say that these changes Care New England has in store for Memorial Hospital is absurd. We need the Birthing Center, we need the Icu and we need the medical floor they want to close! They have already closed the Pediatric floor and they have closed a Med Surg floor Wd 6. Isn't that enough??? If everyone in Pawtucket and the surrounding community made what Mr. Keefe makes then Memorial wouldn't be in debt!! He should be so kind to give up a pay check or 2 a month to help the struggling hospital but he wont. Pawtucket is not one of the richest communities and therefore closing the floors they want closed will cause some not so good out comes. We are right in the middle making it easy accessible for a lot of people.. There has got to be a way to help Memorial Hospital and not let Care New England ruin it more!! I will not associate with Care New England should they win this battle and most of Pawtucket feels the same way! \*

Why is it the Orthopedic group wants the floor that the Birthing Center is on??? They just renovated that floor not long ago. The floor Ortho is on was done over for them and the Dr. isn't happy there so they were going to renovate the old pediatric floor but that wasn't good enough for him so now he wants the Birthing Center when there is another entire vacant floor which is the old rehab unit right on the first floor to the left of the main entrance!! This is so insane!!! Please think of other options before allowing CNE to win this battle.. PATIENTS ARE SUPPOSED TO COME FIRST NOT A PAYCHECK!! Mr. Keefe cares about the paycheck and nothing more!! So putting peoples lives at risk is ok??? He shouldn't of went into the healthcare field then because it is not supposed to be a business opportunity!! Peoples lives are in his hands and he doesn't care!!!

Thank you for your time

[REDACTED]

Sent from my iPhone

Sent from my iPhone

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:29 AM  
**To:** Karina McCarthy  
**Subject:** RE: Memorial Testimony

Thank you for your comment, Ms. McCarthy.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Karina McCarthy [REDACTED]  
**Sent:** Saturday, March 19, 2016 8:48 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Testimony

When I found out I was [surprise!] pregnant I did what I thought every pregnant woman did. I went to my local doctor who was affiliated with my local hospital. What should have been a joyous experience was borderline traumatic. I wanted a low/no intervention pregnancy and birth. I was treated like a disobedient child. Multiple people were brought in to convince me to proceed in the way that they were accustomed to doing things. They threatened me. They gave me ultimatums. I felt helpless and alone. I left in tears. Did I really have no choice in what happened to my body?

So I did my research. I watched documentaries. I read books. I talked to other moms. I read online reviews. And finally I decided to tour Memorial Hospital. The nurse that gave us the tour answered every single one of questions. Things the "other" hospital was shocked by she didn't even blink at. After a fifteen minute tour my fiance and I were sold. I left crying again; only this time they were tears of joy. [I know, pregnant women cry a lot!]

Fast forward through my low/no intervention pregnancy to week 42.5. I arrived at the hospital at 11pm. I was contracting every five minutes or so. I wasn't left in a waiting room. I wasn't put into triage. I was brought immediately into the Maternity ward and given a bed. They checked me and [drumroll] I was a 2. A TWO! All of the hospital horror stories flashed through my head. They won't admit me! I'll have to drive home in a snowstorm and have the baby on the toilet! But none of that happened. The nurse kindly told me that they would give me an hour to get to a 3, and then we would talk about our options. She recommended walking so I paced the halls. Around midnight the anticipated check came and I made the cutoff.

From there the next 15 hours are kind of muddled. But here are the parts that have stayed vivid in my memory:

**\*\*While filling out paperwork my nurse was extremely respectful and aware of my contractions. When I closed my eyes and began to breathe deeply she stopped talking until I was done. Before walking me back to my room she looked me in the eye and told me that she had seen a lot of births**

and that I had what it takes. She complimented my composure and said she was looking forward to hearing about my successful natural birth the next day. I don't know if that's a line she feeds all moms, or if I was managing exceptionally well. But those words played in my head through labor. More than my fiancé's or my doula's or my mother's, because this stranger had spoken when she could have said nothing. She made me feel confident, able, and special.

\*\*I also recall never being asked if I wanted an epidural. Not once. They had my birth plan. They read it. They knew it. They respected it. It was so different from other birth stories I had heard.

\*\*During my labor the nurses didn't do much. In between contractions I sometimes wondered if they should be doing more than just watching me quietly. But when I came into transition, and my cool facade went out the window. All of a sudden there were hands on my back, and confident words in my ear. They were there all along. Silent coaches. Waiting to be needed.

This is truly a love story. As my sweet angel baby was born on Valentine's day. While I lay there with her in my arms everyone quietly dispersed and it was just us and our daughter. After allowing us to bond uninterrupted a nurse gently asked if I was ready to clean off and change rooms. I never felt rushed or persuaded. Even after birth I still felt empowered and in charge.

The next two days passed by in bliss. My initial decision was to sign us out as soon as possible. But after the care we were given I never wanted to leave! The food was fantastic. Every doctor, nurse and specialist was kind, understanding, undistruptive. Before we left the nurses presented us with a large felt Valentine with our daughter's name on it. Apparently one of the nurses had made them for all the babies born on Valentine's day. Also, apparently the hospital was having a baby boom like they hadn't seen in years. APPARENTLY the room that we were staying in was a converted training room! We never suspected that the nurses were doing extra work, or that our room was rushed together last minute. The respect that I have for those nurses is exponential. They never complained, never huffed, never took more than a minute after I rang the call button to pathetically ask for another ice pack.

I could not have had a better experience than I did at Memorial Hospital. From the first tour to leaving with my baby it was picture perfect. Was I one of those lucky moms with an easy labor? No. But I had a support team that was there with me to help me through. They were committed to ME. To what I wanted out of MY birth. And if you want to birth differently they will support you as well. I gush to everyone I know. I've converted multiple women! If I have to have more babies to keep the doors to the maternity doors open I will! It's a safe haven for women who want to birth without pressure or judgement. And I'm so lucky to have found them.

Memorial is changing the game. They're making birth the way it should be. We can't let that momentum fall.

Sincerely,  
Karina McCarthy

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:30 AM  
**To:** Baldwin, Nell  
**Subject:** RE: Birthing Center closure

Thank you for your comment, Dr. Baldwin.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Baldwin, Nell [REDACTED]  
**Sent:** Saturday, March 19, 2016 9:10 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Birthing Center closure

Dear Paula

My Nell Baldwin and I am a current third-year medical student at Brown Medical school with a strong interest in Family Medicine with a strong interest in full spectrum care including obstetrics care. I have have worked at Memorial Hospital, the FCC, and the Birthing Center over the past three years. **I urge you not to close the Birthing Center at Memorial Hospital.** The Birthing Center offers high-quality, compassionate, and evidence-based care for whole families. Furthermore, the Birthing Center provides a nationally-recognized training location for physicians focused on serving the most vulnerable populations throughout our country.

This closure removes a virtual opportunity for medical students in Providence to train as Family Medicine doctors; without rotations or a strong residency for Family Medicine, how can the school produce primary care providers to help address the national shortage we are currently experiencing? This closure will cause great harm to both current patients and patients of the future.

At Brown Medical School, we currently have a subinternship in colorectal surgery (among several others under surgery), but not a single one in family medicine after the closure of . What does this say about our healthcare priorities as a city?

Thank you for your consideration and your efforts on this dire matter.  
Nell Baldwin  
[REDACTED]

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Monday, March 21, 2016 9:31 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: I am a mom in.txt - Invitation to view

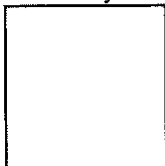
*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** Courtney Paquin (via Google Docs) [REDACTED]  
**Sent:** Saturday, March 19, 2016 8:34 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** I am a mom in.txt - Invitation to view

Courtney Paquin has invited you to **view** the following document:

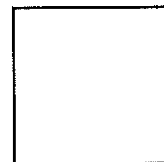


I am a mom in.txt

[Open in Docs](#)

This email grants access to this item without logging in. Only forward it to people you trust.

Google Docs: Create and edit documents online.



March 19, 2016

Dr. Alexander-Scott,

I am a mom in limbo. 29+ weeks with no idea if I will be able to deliver at Memorial's Birthing Center. The road to pregnancy was not easy for us but 15 months into our trying to conceive journey I took my first positive test. After being present for my nephew's birth, also at Memorial, I knew The Birthing Center was the choice for me. But I am not the only parent to be in this scenario and I wanted to make sure my partner was just as comfortable with this decision. I was fortunate to already have Dr Magee's name because when I contacted my primary care doctor she could give me the name of obgyn practices for Women and Infants but none that could assist me in my ultimate goal of delivering at Memorial. The Family Care Center put me in contact with Dr Magee and we set up a time to come in and meet with her at The Birthing Center. At this meeting she answered my newly pregnant questions as well as my partner's questions and we left this meeting both feeling comfortable knowing The Birthing Center was the choice for us. I want to focus on that word choice for a minute. I realize that my partner and I are fortunate- both college educated, with supportive families in close proximity to us, reliable jobs and access to health care. We had the ability and privilege to choose where we wanted to have our baby. I realize that not all mothers to be or families to be are afforded this opportunity. In my professional life I am a social worker, serving low income children and their families. Everyday I see the struggles that families in poverty face and know the importance of a community hospital or health center. Let's get back to choice, Women and Infants was familiar to my partner and I, both with friends and family happily delivering their babies there. I also happen to have family members that work there. However Women and Infants was not the choice we made. CNE is mistaken if they are assuming families planning to deliver at Memorial will just accept a transfer of their care to another affiliated facility. If that were the case, why didn't we make that decision to begin with? As I move further along in my pregnancy CNE is putting me in a difficult position- continue with the doctor we have been beyond happy with since I was just 5 weeks along or start looking at alternative birthing locations at seven and a half months pregnant.

I urge the Department of Health to recognize the importance of Memorial's Birthing Center both for the urban communities that it is closest to as well as the families to be seeking out the type of personalized prenatal and maternity care that it is known for.

Thank you,

Courtney Paquin

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 22, 2016 1:31 PM  
**To:** Heidi Radlinski  
**Subject:** RE: MHRI Maternal Child Health Fellowship

Thank you for your comment, Dr. Radlinski.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Heidi Radlinski [REDACTED]  
**Sent:** Tuesday, March 22, 2016 1:22 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** MHRI Maternal Child Health Fellowship

Dear Rhode Island Department of Health,

I am writing to you as a former Maternal Child Health Fellow who trained at Memorial Hospital of Rhode Island.

I have heard that there are plans to close MHRI Birthing Center and I have great concerns about the impact of the closure on the fellowship.

The Brown Family Medicine Maternal Child Health Fellowship is an extraordinary program that inspires and trains physician to gain advance obstetric skills and neonatal experience to help family medicine graduates care for underserved populations. Specifically, Family Medicine is the leading specialty providing care in rural areas and underserved populations. We need physicians trained in advanced obstetric skills to provide care in these areas where obstetricians choose not to practice. Many fellows, such as myself, go on to train docs to go to rural areas or other underserved areas. Many fellows, such as Esgar Guarin, go to rural areas to practice where there is great need.

It is my understanding that moving the fellowship to one of Care New England's facilities is not an option as they are not supportive of family medicine and have stated, not formally, but politically and implicitly, that they will not grant advanced obstetric privileges such as C-sections to family doctors regardless of skill or experience. For this reason, our graduated fellows have not tried to get privileges at CNE because then they would have to report these denied privileges during any subsequent credentialing and licensing procedures.

Being from Montana and caring for rural populations, I plead that you consider the national consequences of closing the MHRI birthing center. I feel it will have devastating effects on the MCH fellowship. Brown's fellowship is only one of a few family medicine run OB or MCH fellowships in the country and its closure would be a major catastrophe for our specialty and the populations we serve.

I urge you to closely consider the national consequences of closing this training facility.



Thank you for your time,

[REDACTED]

## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Tuesday, March 22, 2016 10:18 AM  
**To:** Carole Ann Penney  
**Cc:** Shelov, Elizabeth (OHHS)  
**Subject:** RE: Memorial Hospital Birthing Center

Thank you for your comment, Ms. Penney.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Carole Ann Penney [REDACTED]  
**Sent:** Monday, March 21, 2016 8:15 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital Birthing Center

I am writing regarding the plans to close the birthing center at Memorial Hospital. Although my husband and I do not live near Memorial, after doing extensive research on hospitals and birthing centers in Rhode Island, we were confident in our decision to have our baby at Memorial. The doctors and nurses in the birthing center have a reputation in the community as a family-centered and patient-centered practitioners that carry out the true meaning of the words "health care."

From the very beginning, the focus of the entire staff was on our comfort and helping us to achieve our goals during the birthing experience. At Memorial, they treat pregnancy and birth not as an illness but rather as a natural process. It is shocking that this makes Memorial stand out as a unique offering in our state, but it does.

Throughout my pregnancy, my husband and I attended Memorial's Centering Pregnancy group appointments, which allowed us to get to know the staff of doctors and nurses, grapple with the myriad changes and decisions that come with giving birth, and share questions and reflections with other patients and families from diverse backgrounds.

In our third trimester ultrasounds, we were diagnosed with a growth restriction, but Dr. Magee took the time to create a personalized plan with us rather than impose what may have been considered the blanket recommended courses of action. She and the nurses were strong advocates for our desire to have a natural birth. Additionally, their doula-friendly policy was very important to us. They are the only hospital with a volunteer doula program that affords anyone, regardless of ability to pay, that type of support.

While I labored, instead of restricting me to a bed and fetal monitor, the nurses allowed me to move around and utilize water therapy (including both showers and baths). They worked with us to monitor the baby while being minimally invasive or restrictive. The Memorial staff went above and beyond. We were certain that our experience and the health of our baby were paramount; Expediency was not even a consideration.

I believe this level of trust in the Memorial team was key to my ability to have a natural, powerful, and empowering birth experience. I was never made to feel that healthcare was happening to me - I had a voice, was respected, and had agency in the process. This should be the rule, not the exception; This opportunity should be afforded to every family, whether they choose to travel to Memorial or are part of the important communities that rely on the hospital for their care.

We are incredibly grateful to everyone at the Birthing Center, and hope that this important and unique resource - the environment, the incredible staff, and the principles that guide their work - will continue to serve the Rhode Island community.

Carole Ann Penney

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 25, 2016 9:52 AM  
**To:** McDonough, John A  
**Cc:** Shelov, Elizabeth (OHHS)  
**Subject:** RE: Memorial Hospital of Rhode Island

Thank you for your comment, Mr. McDonough.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** McDonough, John A [REDACTED]  
**Sent:** Friday, March 25, 2016 9:51 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital of Rhode Island

I think Care New England knowingly lured Memorial into a merger deal where they fully intended to take Unconscionable advantage.  
Simply put, the plan would be to get control of a competitor strip its services to bolster revenue for what CNE considers its core hospitals.

Care New England's requests should be rejected .

Memorial Hospital must stay open until it can be sold to someone who will honor its commitment to the community.

**John A. McDonough Jr, R.N.**  
Rhode Island Hospital  
[REDACTED]

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 25, 2016 9:43 AM  
**To:** elisabeth bux  
**Cc:** Shelov, Elizabeth (OHHS)  
**Subject:** RE: Keep the Birth Center at Memorial Hospital open!

Thank you for your comment. Elisabeth.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** elisabeth bux [REDACTED]  
**Sent:** Thursday, March 24, 2016 8:41 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Keep the Birth Center at Memorial Hospital open!

To whom it may concern at RI Department of Health:

Please do not allow inpatient obstetrical services at Memorial Hospital of Rhode Island to be transferred to another facility! The staff and culture of care at MHRI's birth center provide a tremendously important and unique service to women and families in RI.

I planned a home birth for my child in 2014 but intentionally chose MHRI if I needed to give birth in a hospital because of its reputation for individualized care, it's respectful relationship with my team of nurse midwives, and its proximity to my home. When I did end up needing to be transferred I was so grateful for the respect and quality of care I received at MHRI. I am certain I would not have had the same experience at any other hospital in RI.

Please do not allow this transfer and help Memorial find a way to prioritize the maintenance of this valuable community resource.

Elisabeth  
Providence, RI

I was troubled to hear of the proposal to close the Birthing Center at Memorial Hospital of Rhode Island. I have read Care New England's rationale for this decision. Their argument seems to revolve around the financial burden of what they see as redundant medical services. I understand this argument, but I do not agree with it. This thinking highlights what I see as a failure of the current medical industry. This failure is the prevalent view that pregnancy and childbirth are simply medical procedures. They are far more than medical procedures. Pregnancy and childbirth are life events that have significant and lasting effects on mothers, fathers, children, and entire families. The Birthing Center at Memorial Hospital truly understands this distinction. For this reason, it provides a unique medical service to the Rhode Island community. This service cannot simply be transferred to another facility with a pre-existing culture and set of practices.

My wife gave birth to our first daughter at a hospital with a good reputation, top-notch doctors, and modern equipment. It was most certainly a profitable hospital. It was also a hospital close to our home in Jamestown. The experience we had can only be described as a violation. We had our sense of freedom and control taken from us and were coerced into repeated interventions. All of this was done so that we could follow the hospital's arbitrary and unnecessary timeline. My wife gave birth to a beautiful, healthy, and strong baby girl. However, her physical and emotional recovery was long, difficult, and expensive. In fact, it was not until after having our second daughter two years later at the Birthing Center at Memorial Hospital that she truly felt healed.

When we learned that we were having a second child, we followed the advice of our friends and family to travel to Memorial Hospital for our prenatal care and childbirth. Our experience was dramatically more positive. We were treated with respect and compassion at every stage of the process. Instead of pressure for interventions or procedures, we were engaged in a dialogue about our options. During the birth my wife was given the time and space to safely deliver our daughter without any unnecessary interventions. In short, my wife was given the opportunity to discover her own strength. This was an opportunity that was taken from her in our first birth experience. Giving birth in the unique environment provided by the Birthing Center gave her the closure that she desperately needed after her first delivery. That was over a year ago and she still refers to the experience as healing.

In conclusion, the services offered by the Birthing Center at Memorial Hospital are not medically redundant. They are both unique and necessary. It is the only place in the region that families can rely upon to be treated with the compassion and respect needed to give birth in the manner they choose. This is beneficial not just for those families that prefer this style of care, but for those who need it because they have been damaged by other profit-oriented hospitals.

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 24, 2016 1:00 PM  
**To:** Laura Edwards-Orr  
**Subject:** RE: Statement of Support for the Memorial Hospital Birthing Center

Thank you for your comment, Ms. Edwards-Orr.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Laura Edwards-Orr [REDACTED]  
**Sent:** Wednesday, March 23, 2016 7:35 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Statement of Support for the Memorial Hospital Birthing Center

Dear Ms Pullano,

Please consider my support for the tremendous doctors and nurses and the exceptional level of care they provide their patients at the Memorial Hospital Birthing Center. In October of 2010, I delivered twins with the help of Drs Magee and Morton and an army of nurses and medical students. What could, and perhaps should have been, a frightening week-long hospital stay was in reality one of the most powerful experiences of my life. While receiving a high level of care to combat preeclampsia and a very, very long labor every single person involved in our birth experience knew our name, understood our situation and our wishes and acted with the utmost respect, compassion and tenderness. As proof, we collectively delivered two healthy babies and shepherded me from poor health to vigor in short order. The leadership of the doctors at this hospital who treat birthing mothers as healthy people rather than medical cases is truly in the spirit of 'do no harm' and should be held up as a model for community care.

This experience has anchored all of my accomplishments in the five years that have since passed. Knowing that if I could thrive through such a challenging physical and mental experience, I should not be afraid of discomfort or the unknown. Good things come to those who labor - especially inside of a caring community.

The groundswell of support for Memorial, and the commitment of the greater birth community truly show that my experience is not unique. That the staff of this hospital have touched so many people in this empowering and affirmational way. Not to mention with tremendous success rates, unparalleled by the other hospitals in the state.

Please do consider keeping this facility open. In doing so, more students can learn from what has from these exceptional doctors. And the leadership at Memorial can continue to elevate Rhode Island as a leader in the mother/baby-centered birthing community.

Sincerely,

Laura Edwards-Orr  
[REDACTED]

## Shelov, Elizabeth (OHHS)

---

**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 24, 2016 12:54 PM  
**To:** Jen Milette  
**Subject:** RE: Public Comment on Memorial Hospital's Birthing Center

Thank you for your comment, Ms. Milette.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Jen Milette [REDACTED]  
**Sent:** Thursday, March 24, 2016 10:37 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>; friendsofbirthingcenter@gmail.com  
**Subject:** Public Comment on Memorial Hospital's Birthing Center

Jennifer W. Milette  
[REDACTED]

Re: SAVING MEMORIAL HOSPITAL BIRTHING CENTER

Memorial Hospital's Birthing Center must remain open so all pregnant mothers have the option of choosing where to birth. I delivered both of my daughters at Memorial via gentle cesarean. My first was born in March 2012. I needed a cesarean section because she was breech. My midwife had hospital privileges at Memorial. She introduced me to Dr. John Morton. I was able to experience a blissful gentle cesarean with my midwife and doula. We started skin-to-skin and nursing immediately after her birth.


My youngest was born this past February 2016. My water had broke and instead of being under a medical time line, my husband and I were able to stay at home to await active labor. When things were not progressing after three days, I went to Memorial. All the nurses and residents were respectful of our wishes to naturally induce labor to attempt a VBAC. We got advice and space. I was able to use a portable fetal monitor so I could walk around and be mobile. We tried everything with the support of the staff. Eventually my husband and I made the decision that another cesarean was inevitable. Dr. Morton was with me personally as support while the anesthesiologist administered pain medication. Dr. Morton said everyone was there for the big birthday party. He eased my fears.

I had another wonderful birth experience. I received highly personalized care. I had one nurse assigned to me from pre- to post-op for her entire shift. After surgery, I recovered in the maternity ward in my own private room. My nurse got me a lamp so I didn't need to use the bright overhead lights. The staff allowed me to use the hospital's iPhone speaker system during my entire stay. I was able to access wi-fi and play healing music as I recovered. A third-shift nurse made a personalized heart-shaped pillow with my daughter's name because she was born on Valentine's Day. I also got a footprint made of my newborn. Just these simple, personalized touches made us feel special and helped in my recovery. Memorial Birthing Center has 24/7 rooming in. There is no longer a nursery. I was present in the room with my baby for every examination. I met and spoke with the pediatric nurses and family doctors. The lactation consultant helped skin-to-skin and we witnessed my newborn reflexively crawl to my breast to nurse. It was amazing. When we were discharged, my four-year old was able to press a button that played a lullaby throughout the entire hospital letting everyone know in the building that there was a birth.

Here is what separates Memorial and demonstrates why it should remain open as the best option for pregnant women seeking a highly personalized birth. All cesarean sections are gentle cesareans. Several nursing staff from 2012 were still there and a few remembered me from my first birth. Outside midwife practices have hospital privileges ensuring access to all seeking a midwife. There is a volunteer doula program. The hospital has open visiting hours so I can decide when I want family and friends to visit instead of being forced into a brief two-hour visiting window. It was easy to save my placenta to get it encapsulated. There is no triage, no long waiting periods to be admitted to the hospital. It took me five minutes from when I entered the hospital to when I arrived on the labor floor. Women & Infants only has one alternative birthing center (room) in the entire hospital. That severely limits a woman's option to labor naturally.



Thank you for your time and attention. Have a good day.

**Jen Milette, BS, RPR**  
Providing communication access  
for the Deaf and hard of hearing since 1998  


**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 24, 2016 12:56 PM  
**To:** Karlo Berger  
**Subject:** RE: Preserve the model of care practiced at the Birthing Center at Memorial Hospital

Thank you for your comment, Mr. Berger.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** [REDACTED] On Behalf Of Karlo Berger  
**Sent:** Thursday, March 24, 2016 10:47 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Preserve the model of care practiced at the Birthing Center at Memorial Hospital

Dear Ms. Pullano,

I am writing to urge the Department of Health to preserve the model of care being provided at the Birthing Center at Memorial Hospital. This kind of respectful, evidence-based maternity care must remain available to all families in our state.

Thank you,

Karlo Berger

--  
Karlo Berger  
Whole Health Solutions LLC

*Join the Rhode Island  
Holistic and Integrative  
Healthcare Leadership Network:*  
The Future of Healthcare  
[www.facebook.com/groups/548538431943863](http://www.facebook.com/groups/548538431943863)

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 23, 2016 9:39 AM  
**To:** Susie Finnerty  
**Subject:** RE: Memorial Hospital's Reverse Certificate of Need proposal

Thank you for your comment, Ms. Finnerty.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Susie Finnerty [REDACTED]  
**Sent:** Tuesday, March 22, 2016 10:30 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital's Reverse Certificate of Need proposal

Attn Dr Alexander-Scott

Hello,

I oppose the closure of Memorial Hospital's obstetrical unit. I have sent a letter with my personal Memorial experience. You should know that recently, as a professional birth doula, I have had two clients turned away from Women's Care and OB & Associates (the two practices in town who offer midwifery care at Women & Infants) because they were full. No room for new patients. These women cannot access a midwife at all. This closure not only limits the access of care for residents of Pawtucket, Central Falls, etc. as excellently outlined in many testimonies, but limits access to care in an already strained hospital. I am not opposed to Women & Infants, but am opposed to women being turned away for care because they are too busy. We need the space that Memorial provides.

Thank you.



Susie Finnerty  
[REDACTED]

**Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Wednesday, March 23, 2016 11:42 AM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Public comment: Memorial Hospital's Reverse Certificate of Need proposal  
**Attachments:** Don't close Memorial Birthing Center.pdf

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Kathryn Zimmerman [REDACTED]  
**Sent:** Wednesday, March 23, 2016 11:40 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Public comment: Memorial Hospital's Reverse Certificate of Need proposal

Dear Ms. Pullano,

I have attached a letter detailing my concerns regarding the proposal to close Memorial Hospital's Obstetrics Unit. It is also pasted below.

Best Regards,  
Kathryn Zimmerman

22 March 2016

Dr. Nicole Alexander-Scott

Rhode Island Department of Health  
Center for Health Systems Policy and Regulation  
3 Capitol Hill  
Providence RI 02908

Dear Dr. Alexander-Scott and representatives of Care New England:

I am writing in support of the Birthing Center at Memorial Hospital of Rhode Island and to address the plans to close the Birthing Center. The communities of Pawtucket, Central Falls, and all of Rhode Island cannot afford to lose this exemplary care.

I know first-hand how important the Birthing Center is to Rhode Island families. I gave birth to my second child at the Memorial's Birthing Center on March 12, 2016. From the moment I walked in the door I felt safe and respected. Everyone I encountered was fantastic! I knew that they would take excellent care of my son and me. Childbirth is not simply a medical event. It is a unique and life-changing process where the patient is an active participant. The team at Memorial understands this and consistently supports the mother and family through each phase of maternity care. From the providers, to the nurses and the medical residents, every person at the Birthing Center is on the same page. They provide compassionate evidence-based maternity care. The birth of my son on March 12 was not just a safe medical procedure, it was a joyful event attended by the most enthusiastic and supportive team of providers!

My first child was born via planned cesarean section at Women and Infants in 2013. For this pregnancy I planned a Trial of Labor After Cesarean. I knew that I needed a hospital where the entire team would be VBAC friendly, in practice, not simply because it is in the hospital's pamphlets. I chose to switch from a provider at Women and Infants to Dr. Magee at Memorial midway through this pregnancy. This switch was one of the best choices I have ever made. The careful attention that the staff at Memorial paid to me during labor and delivery helped support a safe and successful VBAC.

I urge the Department of Health to consider the way in which Care New England has implemented the closure of the Birthing Center. With a March 20 due date, the final weeks of my pregnancy were incredibly stressful and confusing. My provider was given very limited information regarding the potential closure. No action was taken on the part of Care New England to ensure continuity of care. I did not receive any communication from Care New England regarding the potential closure until March 14, the afternoon that I returned home with my newborn son.

I also urge the Department of Health to investigate Care New England's claims that Memorial Birthing Center is providing "redundant services", as their representatives have claimed in televised interviews. The prenatal, labor and delivery, and postpartum care at Memorial is unique. The gentle cesarean is standard practice there, as is their consistent evidence-based approach to VBACs. These two things alone set the Birthing Center apart from other hospitals in the Care New England network. I also urge the Department of Health to look carefully at Lifespan's plan to offer maternity care at Rhode Island Hospital, just blocks from Women and Infants. Centralizing maternity care in one part of Providence does a disservice to vulnerable communities like Central Falls and Pawtucket.

I am so very fortunate to have been able to give birth at Memorial's Birthing Center. Many women do not have the resources that afford them a choice. High quality family-centered maternity care is not a luxury but a right.

Access to this care is in the best interest of Rhode Island families and of the future of Rhode Island. Please keep Memorial Hospital's Birthing Center open!

Sincerely

*Kathryn Zimmerman*

A black rectangular redaction box covering the signature of Kathryn Zimmerman.

## Shelov, Elizabeth (OHHS)

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**From:** Dexter, Michael (DOH)  
**Sent:** Wednesday, March 23, 2016 4:17 PM  
**To:** Pullano, Paula (DOH); Shelov, Elizabeth (OHHS)  
**Subject:** FW: Topic:

-----Original Message-----

**From:** Menard, Rita  
**Sent:** Wednesday, March 23, 2016 4:15 PM  
**To:** Dexter, Michael (DOH) <Michael.Dexter@health.ri.gov>; Powell, Sandra (DOH) <sandra.powell@health.ri.gov>  
**Subject:** Fw: Topic:

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**From:** Website, DOH  
**Sent:** Wednesday, March 23, 2016 3:45:02 PM  
**To:** Menard, Rita  
**Subject:** FW: Topic:

Hello Rita,

Please see the email below.

Thank you,  
HEALTH

-----Original Message-----

**From:** [REDACTED]  
**Sent:** Monday, March 21, 2016 9:25 AM  
**To:** Website, DOH [REDACTED]  
**Subject:** Topic:

Topic:

What is your concern, or question, or anything else you think we should know to assist you?:  
Importance of preserving unique birthing center at Memorial Hospital.

I am the grandmother of a baby boy born a month ago at Memorial Hospital's birthing center- Tristan Charles Hubbard. I am very concerned about the proposed closing of the birthing center, first because it will deprive local residents of a needed facility, most importantly those who don't have access to a car and must use public transportation. The alternate birthing options will place a severe burden on the many lower income residents of the local area.

But, I am most concerned about the loss of the unique services which Memorial Hospital offers its obstetric patients. My daughter, who lives at the opposite end of the state, worked hard to find the doctor and center that would allow her to pursue having her third child vaginally, despite having had an emergency C-section for her second baby. Dr. Morton, who performed the delivery and coached her prior to the birth, proved to be all that she had hoped for and more. From

what I learned, he assumed a deliberate approach during the delivery period, not rushing things along, to allow it to proceed naturally -- and it did! I believe that none of the other hospitals in the State, including the two other Care New England hospitals, would have encouraged this patient-centered approach to the delivery.

And so, on behalf of the many other Rhode Island mothers who will seek such care and delivery in the future, I plead that you NOT CLOSE MEMORIAL HOSPITAL'S UNIQUE BIRTHING CENTER AND ENSURE THAT THIS KIND OF BIRTHING MANANAGEMENT BE PART OF THE CHOICE SYSTEM FOR ALL OF RHODE ISLAND'S MOTHERS IN THE FUTURE.

Name: Karen Votava

[REDACTED]



## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 24, 2016 2:34 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Save Memorial Hospital Birthing Center  
**Attachments:** Save Memorial Hospital Birthing Center Letter.docx

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*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** David Demick [REDACTED]  
**Sent:** Thursday, March 24, 2016 2:21 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Cc:** friendsofbirthingcenter@gmail.com  
**Subject:** Save Memorial Hospital Birthing Center

To Dr. Alexander Scott  
RI Dept of Health  
3 Capitol Hill  
Providence, RI 02908

Our family wanted to reach out to you to voice our opposition to the closure of the Birthing Center at Memorial Hospital and our reasons for this position. We recently gave birth to our first child at Memorial Hospital and had a wonderful experience. The doctors, nurses, and administrative staff provided high quality customized care during our hospital stay. They respected our birth plans and made our drug-free delivery a healthy, smooth, and joyful experience. It is clear that the entire team at Memorial Hospital is focused on a complete patient-centric culture of care.

The quality of a patient's care should be judged and incentivized based on healthy outcomes, rather than rewarded monetarily by the volume of procedures.

Closing the Birthing Center would not be in the best interests of patients throughout the State. Keeping the Memorial Hospital Birthing Center open will only improve access to family-centered, evidence-based maternity care in an effort to increase positive birth outcomes for all RI women regardless of race, education, or socio-economic status. improve access to family-centered, evidence based maternity care and increase positive birth outcomes for all RI families regardless of race, education, or socio-economic status.

In regards to the claimed financial losses at Memorial Hospital that Care New England is citing for evidence of the need to close the Birthing Center, we have noticed startling results of inefficiencies in the billing department. Care New England ought to look deeper into the billing department, rather than shutting down

well-functioning departments like the Birthing Center. I have noticed in my dealings with Memorial over the last year during my pre-natal and maternity care, billing delays, which resulted in zero reimbursement by my health insurer HPHC. These claims, for routine pre-natal laboratory testing (having nothing to do directly with the Birthing Center), were rejected and the insurer declared "no reimbursement, no patient responsibility" because the claims were not submitted within the specified time limit. The amount of money that the hospital was denied by my insurer due to late billing is in the **thousands**. From my experiences, any monetary losses experienced by Care New England associated directly with my and my child's care at Memorial Hospital occurred because of billing delays rather than inefficiencies at the Birthing Center.

In summary, we strongly urge the members of the Department of Health and Care New England to keep the Birthing Center open. In growing our family, we look forward to delivering future babies at the Birthing Center and hope it will be there for us. Please reconsider closing this important resource for RI families.

Sincerely,

David, Audrey and Felix Demick

## Shelov, Elizabeth (OHHS)

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**From:** Pullano, Paula (DOH)  
**Sent:** Thursday, March 24, 2016 12:57 PM  
**To:** Howard, Elisabeth  
**Subject:** RE: comments on Memorial

Thank you for your comment, Liz.

*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

**From:** Howard, Elisabeth [REDACTED]  
**Sent:** Thursday, March 24, 2016 10:51 AM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** comments on Memorial

To the Department of Health:

After careful listening and reflection on the numerous testimonials regarding Memorial Hospital, I would like to respond to the concerns brought forward.

A strong, unified message was voiced at the hearings: That women desire safe, respectful care that honors personal preference and the unique family experience, in an environment that is supportive of low intervention and facilitation of normal physiologic birth. Families expressed a desire for individualized attention in a setting that does not dehumanize or mechanize their birth experience.

Collaborative, inter-professional care, has evolved tremendously at Women and Infants over the last thirty years.. At Women and Infants, there are currently 23 Certified Nurse Midwives (CNMs) credentialed and practicing. There are 2 midwifery services that provide full scope 24/7 care in both the hospital's Birth Center and Labor and Delivery Unit, with seamless transition to complex care when needed. An additional practice includes a group of academic midwives who provide care both in the emergency department and the labor floor, working in a team of providers and educating our next generation of physicians. Women and Infants is proud to provide the only in-hospital birth center in Rhode Island with early discharge home and a follow up visit the next day with the nurse who cared for the family. Continuous, compassionate partnership with women and their families is a core value in midwifery. Support for low intervention in the birth process, self-determination, and shared decision making are essential to midwifery-led care.

There were some inaccurate comments made regarding credentialing and privileging at Women and Infants. A CNM in the hearings stated that there was "no mechanism" for her practice to be credentialed here, and despite meeting with administration here, she has not obtained privileges. The mechanism for credentialing certified nurse midwives at Women and Infants is similar to physicians in terms of requirements for licensure. However, all midwives practice within a system for consultation, collaboration, and referral. These mutually agreed upon guidelines ensure safety and continuity for our patients. The consultative relationship has not been

identified or yet established in this case. It does not mean that it is being dismissed or disregarded. She further stated that a physician must be present at all midwifery births, making this too expensive for a health center model. This is inaccurate. While there must be in-hospital consulting physician presence, they do not need to attend a midwifery birth unless there is a change in risk and indication to be present. She also said "there is no one to call" when transferring a patient. This is additionally not accurate as Women and Infants adheres to hospital regulation and the Emergency Medical Treatment and Labor Act (EMTALA), which establishes the legal framework for access to care, regardless of planned birth setting. She additionally refers to a "complaint-based" system of care, which is erroneous and inaccurate. Women and Infants, like many hospitals, use quality indicators set forth by the Joint Commission. These are objective, evidence-based quality indicators endorsed by the multi-stakeholder group the National Quality Forum.

Women and Infants is working hard to safeguard an integrated approach to care of women and families, ensuring coordinated communication, collaboration and respect among all health care providers who attend to the patient. The nurses, physicians, and midwives who care for patients here are universally concerned that the patient and family experience is optimal.

Sincerely,

Liz

Elisabeth Howard, Ph.D, CNM, FACNM  
Clinical Assistant Professor  
Department of Obstetrics and Gynecology  
Warren Alpert Medical School  
Women and Infants Hospital  
[REDACTED]  
Brown University

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## **Shelov, Elizabeth (OHHS)**

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**From:** Pullano, Paula (DOH)  
**Sent:** Friday, March 25, 2016 1:21 PM  
**To:** Shelov, Elizabeth (OHHS)  
**Subject:** FW: Memorial Hospital Birthing Center  
**Attachments:** DOH letter 032516 012.pdf

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*Paula Pullano*

Center for Health Systems Policy and Regulation  
Rhode Island Department of Health  
3 Capitol Hill Suite 410  
Providence, RI 02908  
(401) 222-1042

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**From:** [REDACTED] (mailto:bscher-mack@verizon.net)  
**Sent:** Friday, March 25, 2016 12:19 PM  
**To:** Pullano, Paula (DOH) <Paula.Pullano@health.ri.gov>  
**Subject:** Memorial Hospital Birthing Center

Please see attached letter.

Barbara G. Schermack . ~~REDACTED~~

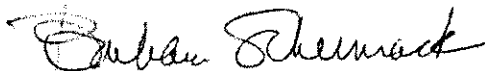
March 25, 2016

Dr. Alexander-Scott  
Rhode Island Department of Health  
3 Capitol Hill  
Providence, RI 02908

Dear Dr. Alexander-Scott:

I write today to urge the Department of Health to call on Care New England to keep the Birthing Center at Memorial Hospital open. It has been a wonderful patient-centered alternative for birthing women in its years of operation, and its closure would be a huge loss to the childbearing community in Rhode Island.

Sincerely,



Barbara Schermack  
~~REDACTED~~



I had a complicated recovery from pneumonia and needed much follow up care. Dr. Lakin ~~was made himself so available to us~~ ~~surrounding me~~ went above and beyond. The model of family medicine practiced by Dr. Lakin, Magee, Dick and others with the birthing center is beyond exceptional. How wonderful they are teaching this ~~patient~~ respectful, compassionate, culturally sensitive, ~~holistic~~ ~~that they take the time to get to know the whole patient~~ model of care to medical students. ~~What~~ And that Family Practitioners care for women through the life-altering and extremely vulnerable child bearing years and continuing care straight through prenatal, birth and postpartum and beyond. What a truly tragic loss this would be to lose an exceptional, and essential family medicine department. It was ~~because~~ the family docs from the birthing center that got my family through my illness and we are eternally grateful. ~~It doesn't want to close anything it should go to the top~~ ~~Why~~ The birthing center <sup>provides</sup> the highest quality of care in that hospital and in my case made up for the huge short comings of the other units.

~~I'd also like to add that the support the whole family and woman.~~

Many of the methods the birthing center might use to ease the discomfort of labor and aid a mother in achieving as low an intervention as possible birth are not financially quantifiable. And that seems like that's really what the issue here. Nurses + docs that trust women, trust birth and have ways of easing the birth discomforts non-medically don't bring in as much ~~as~~ as using a variety of medical interventions pushed at other hospitals. Yes W&I might turn out more babies, make more money, but <sup>the intention of</sup> Memorial's ~~goal~~ ~~doesn't~~ Doctors & nurses is clear - it's about care, it's about women, families, a baby entering the world, couples becoming families. It's about our human experience not about making ~~money~~ ~~and~~ money and turning a profit.

That's what hospitals are supposed to be for anyway, right? Caring for people? Or is it just a business to you? It's clear quality + care are



My name is Chelsea Graham and I am a 1st year resident. I would like to echo the sentiment from my colleague Dr. Henery. What is happening at Memorial Hospital is a form of structural violence. The term comes from liberation theology and is used frequently by a lot of many of our eyes Dr. Paul Ferns. It is not the physical violence that are envisions. It is about systems, poverty, inequality and racism. We all chose this program to serve at a community hospital where we would break down barriers + confront structural violence rather than perpetuate it. ~~which is what is happening in front of our eyes.~~ CAB is taking away a basic human right for the people of Rochester + CR + making their race to an even more difficult location to reach.

I'd like to share an anecdote that exemplifies why we do what we do and why we love Memorial Hospital. A few months ago an Medicine ? was called down to the ER

to admit a middle aged man from Portugal. He spoke only Portuguese Creole and Spanish, so we communicated in Spanish. He had been having chest tightness for weeks and could not walk as far as he used to. He was afraid he was having a heart attack. ~~His~~ Being unable to walk was a big deal for a man with no other means of transportation than by foot. He knew that he carried a lot of high blood pressure yet he didn't have a primary doctor and was unable to attend his medications. ~~when he~~ In the hospital his BP was  $>200/100$ . So we admitted him and controlled his BP. He also received a cath to assess the burden of his heart disease. We got him home on maximal CAD regimen + ensured that he had follow up with one of clinic as his new primary doc.

2 weeks later he sat in front of me in the office chest pain free. He was taking all of the meds that we prescribed. We made sure they

were affordable and as many were  
on the far dollar list.  
He was also now able to walk  
with a cane.

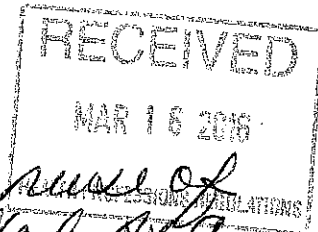
This is a patient who could  
have been easily denied access  
to care on multiple levels; a  
patient who could have been  
a victim of structural violence.  
He was a non-English speaker  
and undocumented. No insurance.  
+ low resources. At the FIC,  
we do not settle for less!

This is family medicine.  
From the ER to the floors  
to the clinic, our taking  
care of our patients and  
making sure they receive the  
care that they deserve.  
This is a story about a man  
where the system did not  
fail him.

By CMT making our inpatient  
services and our national  
child health work elsewhere  
no longer are we going to  
be able to provide high-quality  
wrap around care.

RI Dept of Health.  
3 Capital Hill  
Providence, RI 02907

3/16/16



To Whom it may concern:

I am writing in my capacity as 2015 nurse of the year at Pawtucket Memorial Hospital. As a member of the intensive care nursing staff & feel that I can illustrate how many resources we supply to the hospital patients.

In addition to our duties in the intensive care unit we provide other services to the med/surg and rehab patients. These duties include, but are not limited to, starting intravenous lines, drawing labs, assisting in blood transfusions and assisting in nursing evaluations of complex patients. When a patient does deteriorate on the med/surg or rehab floors we respond to "State Codes", "Code Blues" and "Rapid Response" codes. All of these are essential to the rapid response code's uniqueness as opportunity to prevent further deterioration in a patient's condition.

Please consider all that we do for our patients. The people of Pawtucket and Central Falls are some of the most need people in the State. Please don't limit their access to high quality acute and critical care.

In closing, I can attest to the regulatory care at Pawtucket Memorial Hospital, as I was just a patient there myself. Thank You  
Jeanne Barre, RN, BSN, CCRN